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Elland Urban District Council

Annual Report

of the

Public Health Services

of the Elland Urban District.

1962

FRANK APPLETON, M.B., Ch.B., D.P.H.
Medical Officer of Health.

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E L L A N D U R B A N D I S T R I C T C O U N C I L .

HEALTH COMMITTEE

(As at 31st December, 1962).

Chairman of the Council: Councillor T. GOLDWELL, J.P.

 Chairman: Councillor S.B. TATTERSALL, J.P.

 Vice - Chairman: Councillor (Mrs) A.R. SHARPE, J.P.

Councillor R.D.W. BRITTAIN.

Councillor (Miss) E. BROOK.

Councillor (Mrs) K.M. CAWDRY.

Councillor H. COCKROFT.

Councillor S. DRINKWATER.

Councillor W. HASLAM.

Councillor H. HOWE.

Councillor A. LANE.

Councillor A. NUTTON.

Councillor W. RAMSDEN.

Councillor (Miss) E.T. SHAW, J.P.

Councillor J. WILSON, J.P., C.C.

HEALTH DEPARTMENT.
Public Health Officers.

Medical Officer of Health

F. APPLETON, M.B., Ch.B., D.P.H., D.P.A.
Also Divisional Medical Officer.
Health Department, Council Offices, Elland.
Tel. 3491. (Elland).

Deputy Medical Officer of Health

Miss M.P. MILLIGAN, M.B., Ch.B., B.A.O. (Dublin),
D.P.H. (Hons.), B.Sc.

Assistant Medical Officer

D.B. REYNOLDS, M.R.C.S., L.R.C.P., D.P.H.

Orthopaedic Surgeon

** J. HUNTER ANNAN, F.R.C.S.

Ophthalmic Surgeon

** S. ROBERTSON, M.B., Ch.B., D.O.M.S.
** P.M. WOOD, M.B., Ch.B., F.R.C.S., (Edin.), D.O.M.S.

Consultant Psychiatrist

J.S. HUGHES, M.R.C.S., L.R.C.P., D.P.M.

Dental Officer

W.A. ALLEN, B.D.S., L.D.S.

Public Health Inspectors

A.D. JACKSON, M.R.S.H., M.A.P.H.I., Cert. Inspector of
Meat and Foods.
K. RAMSDEN, M.R.S.H., M.A.P.H.I.
R. SMITH, M.R.S.H., M.A.P.H.I., Cert. Inspector of
Meat and Foods, Diploma for Smoke Inspectors.

Divisional Nursing Officer

Miss C.J. BARKER, S.R.N., S.C.M., Health Visitor's
Certificate, Queen's Nurse.

Health Visitors

Miss E.V. CROSSLEY, S.R.N., S.C.M., Health Visitor's
Certificate.
Miss M. HARTLEY, S.R.N., S.C.M., Health Visitor's
Certificate.
Miss S. WADSWORTH, S.R.N., S.C.M., Health Visitor's
Certificate, Queen's Nurse.

Assistant Health Visitor

* Mrs. M.G. PACEY, S.R.N., S.C.M. (Terminated March, 1962)

Midwives

Mrs. C.M. LAZAREVIC, S.C.M.
Mrs. M.E. MAGER, S.R.N., S.C.M.

Home Nurses

Miss A. CARTER, S.R.N., S.C.M., Queen's Nurse.

Mrs. A.K. MILLS, S.R.N., S.C.M.

Miss E. SMITH, S.R.N., Queen's Nurse. (Commenced January, 1962).

Mental Welfare Officers

S. PARKINSON (Senior).

R.O. KANE, R.M.N. (Commenced June, 1962).

* G.A. LEE, R.M.N., M.R.I.P.H.H., A.R.San.I.

Tuberculosis Health Visitor

Mrs. M.F. DUCKENFIELD, S.R.N., S.C.M., T.A. (Terminated February, 1962).

Clerks

Miss H. CROWTHER.

P. NELLIS (Terminated July, 1962).

A. WALKER (Terminated December, 1962).

Divisional County Ambulance Service Depot Superintendent

W. ANDERSON

* Part time

** Part time by arrangement with the Regional Hospital Board.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

Ladies and Gentlemen,

I have the honour to present my Annual Report for 1962 on the health of this town.

The vital statistics can be considered satisfactory this year, and the birth rate of 17.5 is our highest since 1947 and our adjusted birth rate of 18.4 is higher than that of the West Riding of 17.8 and higher than that for the country as a whole of 18.0. For the first time since the Division was established, Elland has the highest birth rate in the Division. The death rate, however, is higher this year, being 16.1, which is 0.7 above the figure for last year, and our adjusted death rate of 15.5 is higher than that for the West Riding and the country as a whole.

The Registrar General again estimates that we have had a decrease in population, this time of 40 persons. We have actually had a natural increase in the population of 25, being the excess of births over deaths, and it is our impression that a steady decline in the population of Elland may at last have been halted.

There is no doubt that there has been a movement of population from the north to the south and this movement will not have been helped by all that has been written about the two Englands - a south, where there is better weather, higher wages and less unemployment, and a north, which is colder, drabber and altogether less attractive. We who live here believe that in some degree the warmth of personality compensates for a slight drop in temperature and that there are many advantages in living in a small northern town where cars can still move and where the countryside is both interesting and varied. It is true that the present needs of the north are greater. Many of our houses are over a hundred years old. They were built near factories to provide for the more enterprising of Englishmen who collected together to found the prosperity of the country during the Industrial Revolution. We should not forget that this prosperity was based on the work of many who worked long hours for inadequate pay, cheerfully and courageously, producing their families and living in difficult conditions. The old stone houses that they lived in are by no means slums, although they may be a hundred years old and do not conform with the standard demanded in this age.

It is remarkable, and indeed inspiring, to see how hard the tenants work in the maintenance of their homes, but much of this work is wasted for the houses are often beyond more than temporary first-aid help.

The Council's new policy of replacing the older houses at an accelerated rate, eventually providing additional dwellings for the townspeople of Elland, is now really well launched and in a very few years will take shape. At the same time, plans are in hand for the redevelopment of our town, and there will be added inducement for the young people to stay in their own town. Young active and ambitious people will always be attracted by incentives and possibly the best incentive that local authorities and the Government can provide is better housing. It appears to be reasonably certain, too, that houses built today would be more expensive to build in a few years' time and that money spent on rehousing the people is money well spent. I am glad that the Council have decided to carry out their plans despite the threat of Elland losing its identity as a separate administrative unit. The draft proposals of the Local Government Boundary Commission, suggesting an amalgamation with the Borough of Brighouse were made in July and might well have affected the Council's attitude, but they have not allowed this to deter their plans for the improvements in Elland.

For many years I have given the opinion in my report that the

housing needs of this town were not properly being catered for so that it is nice to be able to say how much I welcome the present plans. It is my opinion, that the provision of houses for the people is the most important social duty a County District can perform.

The first people who have to be catered for by the Town are the young people, who marry earlier and unhesitatingly take on hire purchase commitments, relying on two wages, but this period of comparative affluence enjoyed by the young married couple is followed by a period of comparative stringency, when the children arrive and the wife is no longer able to work. This is, however, a period of great happiness, and although this family is not so well off as they have been because they are spending their money on children, less is spent on entertainment and clothes for the adult members, and the main requirement is satisfactory housing.

Nowadays, with family planning, child bearing is often finished at thirty years of age and the husband and wife have more than thirty years of continued activity together, and at the age of forty-five comes their period of greatest affluence, when they are best able to buy a house for themselves. It is only at this period that the average working-class family can really feel free to afford to buy their own house at the present capital cost, and during their earlier and most important years they need help from the Council in providing a home.

So the housing needs of the family alter very much during family life. At first, very little accommodation is required when a balance has to be struck by housewives between house and work. Very soon after, a two or three bedroomed house is usually necessary, and in later life, often even as young as fifty, a bungalow would meet most needs. Young people demand houses not only because of their greater affluence but because with better nutrition their is early maturation, and adult status and full responsibility is attained at an early age. It is just not good enough today to be expected to live with in-laws; this is not the pattern of the remainder of this century.

I believe that, in the future, it will be essential to provide different types of houses for the different family needs, and for much greater interchange of houses to meet the different family needs. This Council have given careful consideration to this problem in working out there plans for the future, which include the provision of flats and houses for the younger people, and flatlets and bungalows for the older people associated with the welfare services provided by the County Council, including the very valuable warden's service.

Naturally habitable private houses which are let, and these are few in number, are let to tenants most likely to be tenants who will produce a good economic return, and those tenants who are best able themselves to buy houses are the ones most likely to be selected as tenants. Council houses are, and should be, let to tenants with the greatest need and these are often the tenants least likely to be chosen by estate agents. Old people and large families, and young people commencing life together with few tangible assets, are then very dependent on Council housing.

Meanwhile, as plans proceed to build more and better houses, we have been able to represent this year 52 houses in clearance areas and three other houses have been dealt with as individual unfit houses. I am glad to report this belated progress in our slum clearance programme.

We are glad to record in this report an increased amount of work completed this year on Standard Grants. We are very happy that existing houses can, if only for a limited period, so be brought up to living standards, and we should be very pleased if more landlords took advantage of these grants.

The present policy of the County in guaranteeing the rent of tenants with large families, uncertain incomes, and big commitments has already proved of value. It is right that the burden should be shared in this way between the Local Health Authority and the Local Authority for if evicted these families would be a considerable charge on the Local Health Authority and not only are children brought up in their own homes likely to be more satisfactory citizens but even in terms of simple economics the cost to the County Council will be smaller.

It is essential that this system of rent guarantees is kept secret, for our ultimate aim is to bring the family through their strains and stresses and to re-establish them on an even keel.

The help of the Clerk of the Council (Mr. Thomas), of the Housing Manager (Mr. Mitchell), and of the Divisional Welfare Officer (Mr. Johnson) is always sought and always forthcoming during our efforts at rehabilitation. We also often need the help of the National Assistance Officer. It is always difficult to keep a large family and money spent on Children's Allowances is money well-spent. Often the wage earner in a large family is not among the highest paid workers nor is his wife always the best manager, and it is only after extensive training and several years of devoted experience that our Health Visitors are able to give to these families good and acceptable advice. In our department we never try to bully or intimidate people who for one reason or another are not able to make ends meet or who become so dispirited that they cannot summon up sufficient energy to keep their homes, children, or even themselves clean.

Although we have had our successes, we have a long history of only partial success or near failure in our endeavours with other problem families. As society becomes more affluent, the gap between these families and the community in which they live widens, and it can be understood why a poor manager with a small income lapses into apathy. I well remember visiting a poor European country soon after the war, when the residents compared their rate of pay worked out on what it would buy with that of the more prosperous countries, and said that many men spent a large portion of their income immediately it was drawn on having a session drinking, knowing it would be another month before they could indulge again, and knowing too that they could not afford so to do. Some of them felt that only the secure and comfortable could afford to be teetotallers, and that others had to forget their difficulties for one night a month, even though the cost of forgetting ultimately increased their difficulties.

It is easy to condemn the dispirited who waste their money foolishly. They remember nostalgically their comparative affluence as young adult unskilled workers who have not had sufficient wise parental guidance and who have acquired expensive habits very soon curtailed by a marriage accelerated by expected parenthood.

I sometimes think that the less intelligent in the community might profitably spend more time in school in learning family budgetting, household management and ordinary everyday cooking and cleaning, learnt by the more fortunate at their mother's elbow.

It must be our endeavour in a preventive medical service to do all we can to prevent the children of the few, and there are only a few, becoming the progenitors of problem families of the future, and I believe that the education service which has always done so much could widen its horizons.

It is true that so often there is a dichotomy in these children's lives, and that school and home are two widely different places. In one, on ordered methodical lines with scrupulous cleanliness, good materials and first-class equipment a beautiful meal is prepared, and in the other, the only equipment is dirty, only the top of the stove is

used, and a tin opener is the major item of daily use. Old pans and other less efficient equipment might bring the two worlds of the older female school children closer together.

I think there is a good deal to be said for the teaching of children in the schools how to cook a satisfying meal with equipment which is somewhat out of date.

Obviously, this cannot be the sole form of teaching for the majority nowadays start life with well equipped homes, and girls from problem families, too, should know what optimum conditions to strive for, but the teaching of this minority is very important for they do not learn at home. Indeed, they can be said to unlearn at home, and to be inclined to dismiss optimum conditions as impossible of attainment. It is important that these girls should understand that what they are taught in school has its practical application at home. Their difficulties are manifold all through their school life. There is little encouragement to read for a child who never sees its parent reading. Other children soon learn to regard them as different, and unless we are careful, children and especially female children have already accepted the role of the problem family progenitor before they leave school.

These children are helped considerably by the kindness and encouragement shown to them by the many fine people who teach them, and the schools are their chief source of enlightenment during their important formative period.

From a secure, well-established position with ordered lives and compartmented activities, it is easy to criticize.

It is hard for a thrifty person who has, in his own opinion, at least, had to struggle hard to attain his security, to appreciate the difficulties of a girl who has not had the advantages of a good upbringing. It is understandable that children of secure parents are discouraged from playing with children who are not so well placed, and whose cleanliness and language are not up to recognised suburban standards.

It is understandable that the purchase of a television set on a deferred payment system is considered a dreadful extravagance and not regarded as an effort to conform with the rest of the community, and indeed as of considerable educational value to the under-privileged children.

We are told that we have two kinds of countries, the haves and the have-nots, and two Englands, and we belong to the less desirable part; I am afraid that also in England there is some segregation between the haves and the have-nots, and particularly among the haves and the never-will-have. It is all very understandable, but we must continue to strive in humility and charity to help the town's less fortunate future citizens to be fitted to play their part with their fellow townspeople, and we are most grateful for the understanding of the Council in this aspect of our work.

Perhaps the most important item in this report is the news that preliminary inspections have been made in respect of three Smoke Control Areas which are now awaiting Ministry confirmation.

The Council have set a note-worthy example to the public in putting forward their own property for our first areas.

Many people who have lived for years with obsolete grates and very inadequate domestic heating will be agreeably surprised to find how much warmer and how much cleaner their homes can be. The work of Smoke Abatement must now continue unabated, and I have no doubt that a cleaner and brighter Elland will result. It is perhaps appropriate that our first few steps on the long road of Smoke Control should coincide with the

Council's far-seeing plans for reconstruction of the town.

Already most of our industrialists have taken steps to eliminate smoke emission but we still have some who have made little real effort despite the exhortations of the Public Health Inspector and the Clerk of the Council.

I again remind the procrastinators that in July, 1963, the period of grace allowed for modernisation of plant to enable their compliance with the Clean Air Act will have expired, and no longer will they have any excuse for an offence. We must rely on the continued co-operation of the Alkali Inspectors and of the industries concerned to make a corresponding improvement in the smoke nuisance from the industries outside our control.

An important contribution to clean food was made during the year by an opportunity being taken to install in the new public conveniences in the Town Hall Square, adequate washing facilities for the market stall holders. These facilities have been appreciated and well used. It is in my opinion a much needed and well worth while provision.

Five of our seven slaughterhouses have been brought up to date and are still licensed, and of necessity meat inspection is still taking a large amount of Inspectors' time. We have been well placed with Inspectors but during the year we lost the services of our two pupils who had become increasingly useful. We wish them well in their careers as Public Health Inspectors.

This is possibly the last report which will contain a section contributed by Mr. Allen Jackson, your Chief Public Health Inspector. Trained at Brighouse, he has spent his whole working lifetime in Public Health in this neighbourhood. He has seen many changes and like all of us has over the years had to make many adaptations to changing conditions. I personally shall miss him as a pleasant and agreeable colleague, but I congratulate him on being able to retire in good health and with many other interests to sustain him. He leaves us at what promises to be an exciting time in the history of our town. I thank him and his colleagues in the department for their willing help and constant courtesy over the years.

The Chairman and Members of this Committee have always displayed a keen interest in our work and given us every possible support. I again record most gratefully our gratitude to them. To the Clerk of the Council especially, but also to the other Chief Officials, I also tender our grateful thanks for enabling us to work together for better conditions for the people of this town.

I have the honour to be, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

F. APPLETON

Medical Officer of Health.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR
THE YEAR, 1962.

Statistics and Social Conditions of the Area.

AREA (in acres)	5,951
POPULATION: Census 1961 : 18,357	
Estimated 1962 (Mid-Year)	18,320
AVERAGE NUMBER OF PERSONS PER ACRE	3.08
NUMBER OF INHABITED HOUSES	7,135
AVERAGE NUMBER OF INHABITED HOUSES PER ACRE	1.20
AVERAGE NUMBER OF PERSONS PER HOUSE	2.57
RATEABLE VALUE	£232,421
PRODUCT OF A PENNY RATE	£910.16s.7d.

The Manager of the Elland Employment Exchange has kindly informed me that at the end of 1962, the number of unemployed persons in the Elland area was 63 men and 10 women. These figures include 2 women who were on short time but the majority of the other registrants were in the older age groups and very limited in their ability for normal employment available.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Live Births -

	M.	F.	Totals.
Legitimate	155	140	295
Illegitimate	10	15	25
Total	165	155	320

Live Birth Rate: 17.5 per 1,000 of estimated resident population.
Adjusted Birth Rate: 18.4 per 1,000 of estimated resident population.
Illegitimate live births per cent of total live births - 7.8

Still Births -

	M.	F.	Totals.
Legitimate	1	3	4
Illegitimate	-	-	-
Total	1	3	4

Still Birth Rate per 1,000 (live and still) births: 12.3

Total Live and Still Births -

M.	F.	Totals.
166	158	324

Deaths -

M.	F.	Totals.
152	143	295

Crude Death Rate: 16.1 per 1,000 estimated resident population.
Adjusted Death Rate: 15.5 per 1,000 estimated resident population.

Infant Deaths

					M.	F.	Totals.
Legitimate	...	...	...	...	2	1	3
Illegitimate	...	...	...	...	1	-	1
Total	...	...	...	...	3	1	4
Infant Mortality Rate per 1,000 live-births - total:							12.5
Infant Mortality Rate per 1,000 live-births - legitimate:							13.6
Infant Mortality Rate per 1,000 live-births - illegitimate:							40.0
Neo-Natal Mortality Rate per 1,000 live-births (First four weeks):							6.25
Early Neo-Natal Mortality Rate per 1,000 live-births (Under one week):							3.13
Peri-Natal Mortality Rate per 1,000 total live and still births (Still births and deaths under one week combined):							15.4

Maternal Deaths (including Abortion)-

<u>Number.</u>	<u>Rate per 1,000 live and still births.</u>
Nil	Nil

TABLE 1.

CAUSES OF DEATH OF ELLAND RESIDENTS IN 1962.

<u>Causes of Death.</u>				<u>All Ages.</u>		<u>Total.</u>
				<u>M.</u>	<u>F.</u>	
1. Tuberculosis - respiratory	...	...	...	1	-	1
2. Tuberculosis - other	...	...	...	-	-	-
3. Syphilitic disease	...	...	...	-	1	1
4. Diphtheria	...	...	...	-	-	-
5. Whooping Cough	...	...	...	-	-	-
6. Meningococcal infections	...	...	...	-	-	-
7. Acute Poliomyelitis	...	...	...	-	-	-
8. Measles	...	...	...	-	-	-
9. Other infective and parasitic diseases	...	...	...	-	-	-
10. Malignant neoplasm, stomach	...	...	...	8	4	12
11. Malignant neoplasm, lung, bronchus	...	...	...	1	1	2
12. Malignant neoplasm, breast	...	...	...	-	6	6
13. Malignant neoplasm, uterus	...	...	...	-	2	2
14. Other malignant & lymphatic neoplasms	...	...	...	11	12	23
15. Leukaemia, aleukaemia	...	...	...	2	-	2
16. Diabetes	...	...	...	1	-	1
17. Vascular lesions of nervous system	...	...	...	17	24	41
18. Coronary disease, angina	...	...	...	50	28	78
19. Hypertension with heart disease	...	...	...	1	2	3
20. Other heart diseases	...	...	...	11	25	36
21. Other circulatory disease	...	...	...	8	9	17
22. Influenza	...	...	...	-	-	-
23. Pneumonia	...	...	...	7	10	17
24. Bronchitis	...	...	...	11	6	17
25. Other diseases of respiratory system	...	...	...	2	1	3
26. Ulcer of the stomach and duodenum	...	...	...	3	-	3
27. Gastritis, enteritis, and diarrhoea	...	...	...	-	1	1

<u>Causes of Death.</u>				<u>All Ages.</u>		<u>Total.</u>
				<u>M.</u>	<u>F.</u>	
28. Nephritis and nephrosis	...	...	...	-	-	-
29. Hyperplasia of prostate	...	...	...	3	-	3
30. Pregnancy, childbirth, abortion	...	...	...	-	-	-
31. Congenital malformations	...	...	...	2	-	2
32. Other defined and ill-defined diseases	...	...	...	7	5	12
33. Motor vehicle accidents	...	...	...	1	-	1
34. All other accidents	...	...	...	3	4	7
35. Suicide	...	...	...	2	2	4
36. Homicide and operations of war	...	...	...	-	-	-
Totals				152	143	295

VITAL STATISTICS.

The estimate of the population of Elland is the mid-year estimate of the Registrar General. His estimate is 18,320, as compared with 18,360 for 1961, and 18,353 for the 1961 Census. He considers, therefore, that the population has decreased by 40 since last year. There were 320 live births and 295 deaths, so that there was a natural increase in the population of 25. On the Registrar General's estimate, this would mean that we have lost by migration from the district 65 persons.

The crude birth rate for the year is 17.5 per 1,000 of the population. This compares with the rate for the previous year of 15.2, and is 0.5 below the rate for England and Wales. This crude birth rate has to be adjusted by a comparability factor of 1.05 to bring it into line with that of the country as a whole, and this gives us an adjusted birth rate of 18.4. This compares with an adjusted birth rate for the Administrative County of 17.8 and a birth rate for England and Wales of 18.0.

There were twenty-five illegitimate births, representing 7.8% of the total live births and an illegitimate birth rate of 1.36 per 1,000 of the estimated population.

During the year, there were four stillbirths. This gives a rate of 12.3 per 1,000 (live and still) births. The County rate is 18.5 and the rate for England and Wales is 18.1.

The death rate for the Urban District is 16.1 per 1,000 of the population. This is 0.7 above the figure for last year. The comparability factor for obtaining the adjusted death rate is 0.96 and using this factor we have an adjusted death rate of 15.5. This compares with an adjusted death rate of 13.3 for the Administrative County and 11.9 for England and Wales.

The chief causes of death this year were, in order of frequency:-

1. Diseases of the Heart and Circulation - 134 (compared with 101 in 1961).
2. Cancer - 45 (compared with 54 in 1961).
3. Vascular Lesions of the Nervous System - 41 (compared with 39 in 1961).
4. Pneumonia, Bronchitis, Influenza and other respiratory diseases - 34 (compared with 28 in 1961).

Infant Deaths.

There were four infant deaths in the Urban District of Elland during 1962, and the infant death rate is 12.5 per thousand live births. This infant death rate of 12.5 compares with the rate for the Administrative County of 23.3 and for England and Wales of 21.4.

One of the infant deaths occurred almost immediately after birth. This was a premature infant, weighing under 3 lbs at birth, born prematurely because of an ante-partum haemorrhage. The three other children died of respiratory disease. One aged four weeks, died of Pneumonia; another child, who was six months old, of Laryngo-Tracheitis, several cases of which were occurring in the district at this time, and the fourth child died at four months of age, due to Asphyxia in a pillow. This last case comes under the category of home accidents. It cannot be stressed too strongly that the provision of a pillow for a young baby is a mistake and this danger has been pointed out several times at our Home Safety Exhibitions.

Table 2 gives details of the four infant deaths in Elland, and the age at which they occurred.

TABLE 2.
CAUSES OF INFANTILE MORTALITY IN ELLAND URBAN DISTRICT.

<u>Cause of Death.</u>									<u>Total.</u>
	1 day and under	2 - 7 days	7 - 14 days	14 - 21 days	21 - 28 days	1 - 3 months	3 - 6 months	6 - 9 months	9 - 12 months
Pneumonia	1				1				
Asphyxia							1		
Prematurity	1								
Laryngo-Tracheitis								1	
Total	1				1		1	1	

Maternal Deaths.

There were no maternal deaths in Elland during 1962.

Premature Births.

It will be seen that this year there were 18 children born prematurely, who were $5\frac{1}{2}$ lbs. or under in weight at birth, four being born at home.

TABLE 3.
TABLE SHOWING BIRTH WEIGHTS OF PREMATURE
INFANTS.

Domiciliary.

Birth Weight. lbs. ozs.	No of Infants.	No. of Infants who survived		
		24 hours.	1 - 7 days.	1 month.
5 0	1	1	1	1
4 14	1	1	1	1
3 10	2	2	2	2
Totals:	4	4	4	4

Institutional.

Birth Weight. lbs. ozs.	No of Infants.	No. of Infants who survived		
		24 hours.	1 - 7 days.	1 month.
5 7	1	1	1	1
5 6	1	1	1	1
5 3	1	1	1	1
5 2	2	1	1	1
4 15	1	1	1	1
4 13	1	1	1	1
4 12	1	1	1	1
4 6	1	1	1	1
4 2	1	1	1	1
3 8	1	1	1	1
3 7 ³ / ₄	1	1	1	1
2 14	2	1	1	1
Totals:	14	12	12	12

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Laboratory Facilities.

The Public Health Laboratory, Wakefield, continued to receive clinical material and milk samples for bacteriological examination, while chemical analysis was carried out by Messrs Lea and Mallinder, Public Analysts, Halifax.

Divisional Ambulance Service.

I append hereto particulars of the cases transported during the year. The figures are given monthly, and the total for last year is appended in brackets after the total in each line. This table applies to the whole Division. It has not been possible to split the Divisional figures to give the figures for Elland alone.

Nursing in the Home.

Altogether 10,382 visits were made to patients, and 597 cases were treated during the year.

Domestic Help Service.

Although there was a rise in unemployment in the district, it will be seen from the figures quoted earlier in the report that only ten women were unemployed in Elland at the end of the year, and of these, two were on short time. When there is a recession in the textile trade, we have an increased number of applications for posts as Home Helps but at this very time women who normally work in the mill are able themselves to help their elderly relatives in a voluntary capacity, so that at a period of decreased demand, we have an increased supply. We can be glad that Elland has enjoyed a period of prosperity but it does make for competition for the services of suitable women and makes the Home Help Service particularly difficult to administer.

On the whole, we like to keep the continuity of service with the Home Help so that the old person enjoys the services of the same Home Help for a long period. This helps considerably for they get to know one another and to trust one another. Old people can be very forgetful and can sometimes think that the Home Help is responsible for a petty larceny when the article in question has only been misplaced. The Home Helps get very fond of the old people that they help and often put in extra hours in a voluntary capacity. Not only do they help with the cleaning of the home but they also provide a means of communication so necessary to the old.

The figures for the last few years for the Domestic Help Service are given below in two tables, showing the number of hours worked and the number of cases attended. There has been a slight increase this year in the number of hours worked per case, the reason for this being that there was a slight increase in the availability of women, due to a slight reduction in alternative avenues of employment open. This was not sufficient to provide an optimum number of hours for all the old people requiring the Home Help Service but it did make our task a little easier.

No. of Cases attended by Home Helps since 1948.

<u>Year</u>	<u>No.</u>	<u>Year</u>	<u>No.</u>
1948	5	1952	68
1949	18	1953	79
1950	42	1954	84
1951	49	1955	93

[illegible]

Hours worked by Home Helps during the
past ten years.

<u>Year.</u>			<u>Maternity Cases.</u>	<u>Domestic Cases.</u>	<u>Total.</u>
1953	...	...	1158	8663	9821
1954	...	...	2293	12799	15092
1955	...	...	1342	16330	17672
1956	...	...	1307	19244	20551
1957	...	...	1062	22177	23239
1958	...	...	903	25136	26039
1959	...	...	978	26224	27202
1960	...	...	1068	24662	25730
1961	...	...	466	22578	23044
1962	...	...	616	24876	25492

The total hours worked 25492, is the equivalent of 11.7 Home Helps working a 42 hour week. Actually 48 part-time Home Helps were employed in the area at the 31st December, 1962. Last year the 23,000 hours were spread over 39 part-time Home Helps.

At the beginning of the year, 129 cases in the Elland area were being provided with a Home Help, and 69 new cases were attended during the year. At the end of the year, 127 cases were still being attended.

Of the 198 cases attended during 1962, 162 were for the care of old people, 22 were where the housewife was ill, and 14 were maternity cases. In 13 of the maternity cases, the Home Help was provided for fourteen days, and in the remaining one the patient had ante-natal care only, her baby being born in hospital.

Clinics and Treatment Centres.

The Table of Clinics and Treatment Centres is appended in Table 5.

Plans were in hand at the end of the year for the improvement of Greetland Clinic by the installation of washbasins in the consulting room and the weighing room. These are being provided by the Elland Council who have always been most helpful in the provision of premises for clinics in Elland.

When the Library was moved from Ellen Royd, this provided us with a very suitable building for a new central clinic, and by the end of the year, the work on the adaptation of this building for a clinic and flat for a midwife, or district nurse, was well advanced. We shall be very pleased to leave St. Paul's Methodist School, the only advantage of which was its central position.

As the development in Westgate gets under way and more people return to the centre of the town, the siting of the new clinic should be most

suitable, and we are looking forward to its opening with great satisfaction. It is hoped that this will be early in 1963.

For the first time, Elland people will have a dental clinic of their own, and the Elland Chiropodists have agreed that their services will be carried out at the clinic.

Chiropody.

For some time Stainland people have had the services of a chiropodist provided by the Stainland Nursing Association at the Mechanics' Institute, and Greetland people have had a similar service provided by the Greetland Nursing Association at the Public Hall, West Vale. Both of these Associations have continued to run their schemes independently, and are not reimbursed under the County Scheme.

Many people attending the Greetland Darby and Joan Club were not easily able to go down to West Vale for this service and the Greetland Darby and Joan Club started their own chiropody service. The payments to the Chiropodist made by this Club have now been taken over by the Old People's Welfare Committee, thus reducing the strain on the Club funds. The Old People's Welfare Committee have also run a scheme for the parts of Elland not covered by these schemes, and have provided domiciliary services in the Stainland and Greetland areas. As we have no satisfactory clinic in Elland, treatments have been arranged at the Chiropodists' surgeries and patients have been given the choice of their own Chiropodists. A certain number of patients from Stainland and Greetland have been treated at the Chiropodists' surgeries through the Old People's Welfare Committee. Although these payments are re-imbursed by the County Council as speedily as possible, there is, necessarily, a time lag which places a continuous financial burden on the Committee, for no sooner has one account been settled than a second account is due to be settled, and the monthly outlay thus expended, although reimbursed, has become a permanent charge on the Committee.

Altogether 841 old people, 23 physically handicapped persons and one expectant mother were treated through the Old People's Welfare Committee, and approximately another hundred people were treated under the schemes of the Stainland and Greetland Nursing Associations. Just under 18% of the old people treated had to be treated in their own homes as domiciliary cases.

Patients attend at bi-monthly intervals. At their first appointment they may well require more time but, generally speaking, it has been found that nine patients per session can be attended to as very much of the service is one of nail paring. Patients in urgent need of chiropody treatment may require treatment oftener than bi-monthly. This has been arranged when it is essential.

HOSPITALS.

Infectious Diseases.

There was very little call this year on the Leeds Road Isolation Hospital, which now takes our cases. One case of Scarlet Fever, one case of Follicular Tonsillitis, one case of Sonne Dysentery, and one case of Vaccina following vaccination were the only admissions.

Tuberculosis.

There was little delay in the admission of cases of Tuberculosis to Northowram Hall Hospital. We have, however, been somewhat concerned at the reduction of beds for the accommodation of cases of Tuberculosis in this Hospital so that they could be used for the accommodation of

chronic chest and heart diseases. Although there has been a fall in the incidents of Tuberculosis, it still remains a very serious disease and it should not be forgotten. Nowadays there is a little too much attention given to the clinic side and not sufficient to the preventive aspect of the disease.

The removal of an active infectious patient from a household is not only so that his clinical care can be undertaken under hospital conditions but so that danger, and particularly danger to younger children, can be removed.

Maternity.

The hospital accommodation provided for maternity cases is excellent in this area. Some of our cases go to Huddersfield and Bradford but the majority are delivered in the Halifax General Hospital. All maternity work of the Halifax area is now centralised at the Halifax General Hospital. This Hospital also provides us with a "Flying Squad" for the provision of blood transfusions and emergency treatment at home in cases of home confinement. We have received full information regarding mothers and babies when they are discharged from hospital.

Old People.

There is still a great shortage of hospital accommodation for old people. Some old people have been admitted to hospitals in Huddersfield and Bradford but the vast majority go to St. John's Hospital, Halifax. This Hospital is always full and always has a substantial waiting list. Many of the old people who require hospital admission require it urgently and it is sad indeed that old people living alone and requiring skilled nursing attention have to remain for long periods before being admitted. Other old people who have relatives who are willing to make substantial sacrifices to look after them have even less chance of early admission.

MATERNITY AND CHILD WELFARE.

Health Visitors.

We were more fortunate this year with regard to the health visiting staff, as we were able to maintain the same staff during the year. For this reason, almost a thousand more visits were made this year than last year. But the number of visits is not the important thing. What is important is that the same health visitors were able to maintain continuity with the patients and so were much better able to fulfil their main duty - that of advice to mothers who receive a great deal more benefit when they know the health visitors really well and have established rapport with them.

Their work with problem families too can be much more rewarding when the confidence of the family has been obtained and when the Health Visitor understands the main difficulties within the family.

This year, their work was extended by the County Council Scheme for the guaranteeing of rent in certain cases. Most of the families temporarily on hard times are allowed considerable latitude by the Local Authority but the families who persistently default and who must be considered for eviction are often the families who are less likely to obtain another house and are less likely to get straight without considerable help. The County Scheme has been responsible for saving these families from eviction and helping us to help still further the families

that need particularly our help and advice.

The figures are given below:-

TABLE 6.

Visits paid by Health Visitors

	<u>1961</u>	<u>1962</u>
Visits made to new births	318	395
Visits made to children under 1 year	1368	1767
Visits to children 1 - 5 years	2631	2601
Visits to expectant mothers	44	113
Miscellaneous	1821	2139
Totals :-	6182	7015

MIDWIFERY AND MATERNITY SERVICES.

Mrs. Lazarevic was appointed at the beginning of the year. She is resident in Elland and became responsible with Mrs. Mager for the Midwifery services. We were pleased to have two resident Elland midwives, and Miss Sneezeum, who had done excellent work in Elland, was able to be appointed as Relief Midwife for the whole Divisional area. This appointment of a relief midwife has been invaluable and has relieved from strain the whole midwifery service.

The work done by the midwives is set out in Table 7.

TABLE 7.

Work done by the Midwives during 1962.

Labour conducted -	
(a) as midwives	109
(b) as maternity nurses	-
(c) total	109
Ante-Natal visits	1033
Post-Natal visits	1799

Of the three hundred and twenty-four children born to Elland residents during the year, 109 were born at home. This figure does not give a complete picture of the work carried out by the midwives, for most of the mothers and babies were discharged from hospital before the tenth day and had to be attended subsequently by the domiciliary midwife.

Ante - Natal Clinics.

Table 8 gives particulars of the attendances at the Ante-Natal Clinics. It will be seen that 70 mothers attended our Ante-Natal Clinics.

TABLE 8.

Attendances at Ante-Natal Clinics.

	<u>1959.</u>	<u>1960.</u>	<u>1961.</u>	<u>1962.</u>
Number of sessions	26	51	50	43
Total number of individual expectant mothers	62	73	73	70
Total number of attendances	223	329	349	318
Average number of patients per session	8.58	6.5	7.0	7.4

The Elland Midwives also attend at Doctors' surgeries when special ante-natal clinics are held. Often, ante-natal patients are seen in the course of their ordinary surgeries and it would be impossible to arrange for the Midwives to be able to attend there for every individual ante-natal patient, but we are pleased to encourage Doctors to hold special sessions when the services of a midwife will be available to them whenever it is possible.

Relaxation Clinic.

Forty-six mothers made 237 attendances. Each mother made an average of 5 attendances. Of the mothers attending, none had to have instrumental deliveries.

Infant Welfare Centres.

Table 9 gives the attendances at the respective Infant Welfare Centres in 1962.

TABLE 9.

Attendances at the respective Infant Welfare Clinics in 1962.

	<u>Elland.</u>	<u>Greetland.</u>	<u>Stainland.</u>	<u>Total.</u>
Number of sessions	50	51	51	152
Individual Children attending	377	229	127	733
Medical Consultations	493	788	187	1468
Average number of Medical Consultations per session	9.9	15.5	8.5	11.9*
Attendances of children under 1 year	1918	1793	554	4265
Attendances of children over 1 year	691	674	231	1596

	<u>Elland.</u>	<u>Greetland.</u>	<u>Stainland.</u>	<u>Total</u>
Total Attendances	2609	2467	785	5861
Average attendances per session	52.2	48.4	15.4	38.6

* Doctor only attends fortnightly.

Ophthalmic Scheme.

During 1962, 19 pre-school children were examined at the Ophthalmic Clinic. Spectacles were prescribed in 11 cases.

Orthopaedic Treatment.

During the year, one child under school age was examined, suffering from eversion of feet.

TABLE 4.

BRIGHOUSE AMBULANCE STATION.

STATISTICAL RETURN FOR THE PERIOD JANUARY - DECEMBER, 1962.

	JAN.	FEB.	MAR.	APRIL.	MAY.	JUNE.	JULY.	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL.	
PATIENTS:-														
a. Out-Patients.	1009	910	1256	1063	1355	1048	1207	1185	1136	1311	1305	1185	13,970	(13,843)
b. Admissions.	231	176	198	186	172	152	164	156	169	185	179	190	2,158	(1,988)
c. Discharges.	57	52	68	57	54	62	69	88	58	70	66	61	762	(659)
d. Transfers.	42	15	18	18	11	20	7	9	13	12	12	13	190	(181)
e. Accident Patients.	51	53	40	39	52	76	54	58	38	74	54	60	649	(620)
	1390	1206	1580	1363	1644	1358	1501	1496	1414	1652	1616	1509	17729	(17,291)
Stretchers.	313	242	254	246	271	297	226	282	254	283	272	291	3231	(2,688)
Sitting Cases.	1077	964	1326	1117	1373	1061	1275	1214	1160	1369	1344	1218	14498	(14,603)
Emergency Patients.	122	85	90	83	65	82	73	78	98	98	81	81	1036	(1,033)
MILES.	10109	8929	10845	8986	10704	9912	10194	10014	9265	10885	19588	9240	119671	(119,385)

TABLE 5. CLINICS AND TREATMENT CENTRES.

Name.	Situation.	When Open.
Combined Ante-Natal & Post Natal Clinics.	Clay House, Greetland.	Alternate Wednesdays, 2 p.m. to 4 p.m.
Infant Welfare Clinics.	St. Paul's Methodist School, Elland. Clay House, Greetland. Mechanics' Institute, Stainland.	Every Wednesday, 2 p.m. to 4 p.m. Every Tuesday, 2 p.m. to 4 p.m. Every Friday, 2 p.m. to 4 p.m.
Whooping Cough Immunisation) Polio-myelitis Vaccination) Diphtheria Immunisation)	Whooping Cough Immunisation, Poliomyelitis Vaccination and Diphtheria Immunisation carried out at all Minor Ailments Clinics and Infant Welfare Centres.	
Minor Ailment Clinics.	St. Paul's Methodist School, Elland. Clay House, Greetland.	Every Mon. & Weds. 9.30 a.m. to 12 noon. Every Tues. 9.30 a.m. to 12 noon.
Artificial Sunlight Clinics.	St. Paul's Methodist School, Elland. Clay House, Greetland.	Every Mon. & Weds. 9.30 a.m. to 12 noon. Every Mon. & Thurs. 4 p.m.
Ante-Natal & Post-Natal Exercises.	St. Paul's Methodist School, Elland.	Every Monday 10.30 a.m.
Tuberculosis Dispensary.	Royal Halifax Infirmary.	Mon. & Tues. 9 a.m. to 11.30 a.m. Weds. 9 a.m. to 11.30 a.m., 1.30 p.m. to 3.30 p.m. Thurs. 9 a.m. to 11.30 a.m.
Venereal Disease Clinics.	Royal Halifax Infirmary. York Place, New North Road, Huddersfield.	Mon. 10-7p.m.; Tues. 10-8p.m.; Weds. 10-lp.m.; Thurs. 2-6.45p.m.; Fri. 10-7p.m.; Sat. 9-12noon. Males: Mon.2-4 and 6-7p.m.; Wed. 10-11a.m.; 4.30-7p.m.; Fri. 10-12noon, and 3-4 p.m. Females: Mon. 4.30-6p.m.; Wed. 11-12 noon; Fri. 2-3p.m.
Consultant Ophthalmic Clinic.	Clay House, Greetland.	Alt. Thurs. 10 a.m.-12 noon (by appointment).
Consultant Clinics, Ear, Nose & Throat and Orthopaedic	Brook House, Atlas Mill Road, Brighouse.	By appointment.
Psychiatric Clinic.	- do -	Tuesday 2.30 p.m. (by appointment).

MENTAL HEALTH.

There were again many difficulties encountered in maintaining an efficient Mental Health Service in the community. Most of these were staffing difficulties. It was not until June that the vacancy for a mental welfare officer in the Division was filled, and when the Officer ultimately took up duties a backlog of routine work had accumulated for it had only been possible to undertake work of a pressing and urgent nature. During the whole of this time, we had been exceedingly hard-pressed to staff the various out-patient clinics in this Area and with which the Division is associated. To add to our difficulties, during the year the Psychiatric Unit was opened at Halifax General Hospital and our Divisional Mental Welfare Officers became responsible for the necessary social work in respect of patients from the Division who were admitted to the Unit. Although there is a close liaison between them and the Hospital Almoner in respect of mental health cases who are to be seen outside, it is obviously better for the Mental Welfare Officer himself to carry out most of the social work that arises. The Psychiatrist also took the Mental Welfare Officer on many of the domiciliary visits. In this way, the Mental Welfare Officers came into early contact with patients' relatives and patients' own Doctors, and so were able better to form effective relationships. I believe that the basis of all successful mental welfare work is in effective relationships so that although in many ways the employment of Mental Welfare Officers on domiciliary visits and with social work on patients in hospital is time-consuming, it appears to me to be time well spent.

Outpatient Clinics.

In addition to the Brighthouse Psychiatric Clinic held at our own premises, there are three sessions devoted to clinics each week at the Halifax General Hospital, and patients from Elland tended to gravitate to this Psychiatric Clinic rather than to our own Brighthouse Clinic, as with the present bus service based on the County Borough, it is often easier of access. It may be that with the Unit at the Halifax General Hospital and units envisaged in other general hospitals, more and more patients will attend the Hospitals rather than our Brighthouse Clinic.

Sixty-one new patients were referred to the Brighthouse Clinic this year, as compared with sixty-five last year. They made a total of 448 attendances. A change in Psychiatrists occurred when Dr. J. S. Hughes succeeded Dr. N. V. Wilkinson. Figures for this clinic for the three previous years were as follows:-

	1961.	1960.	1959.
New patients referred	65	77	67
Total attendances	486	424	295

At the Halifax General Hospital Out-Patient Clinic, 41 new patients from this Division (mainly from Elland) were seen last year, so that a total of 102 new patients attended the Out-Patient Clinics in this area. There is a two-way flow of patients at this Hospital between the Psychiatric Unit and the Out-Patient Department, and it may well be that this is the pattern of the future, where, as in other specialities, patients attend the Hospital as out-patients, are admitted, and receive their after-care as out-patients. I believe there is, however, still a place for the Brighthouse clinic. Until the services in the General Hospitals has been further developed, this will continue.

Psychiatric Ward.

The Psychiatric Ward at the Halifax General Hospital, which I have referred to above, received 21 patients from this Division in the latter.

half of 1962, and this Hospital is to be congratulated on opening its doors to mental illness, which will I hope, more and more be regarded as an illness from which people recover and return to their relatives, friends and work as fully integrated personalities. As with other illnesses, it must not be forgotten that some patients, when discharged, are not completely better and need help and understanding.

Mental Welfare Officers.

Dr. Ropschitz, the Consultant Psychiatrist, who is attached to the Halifax Psychiatric Clinic, contributes the following helpful comment on the work of the Mental Welfare Officers :-

Your Mental Welfare Officers are doing very valuable and helpful work both at the Outpatients as well as at the Psychiatric Unit at the Halifax General Hospital. Their activities include the taking of social histories of new referrals and I have arranged that these are taken prior to the patient arriving at the interview

- (a) because the Mental Welfare Officers can form a better opinion if seeing the patient at home, and
- (b) because the report is ready for me at a time it is most useful, that is to say, when the patient comes for his first interview with me.

They have done very good work at the Unit, furnishing social case histories on recent admissions, arranging for interviews with patient's relatives, and helping in the re-uniting of married couples who have fallen out for one reason or other. The Mental Welfare Officers attend the Therapeutic Social Club, which enables them to keep in touch with a large number of patients, etc.

I do believe that domiciliary visits of Mental Welfare Officers along with psychiatrists, are the most logical and useful thing because the Mental Welfare Officers gain by assisting at the examination of the patient by the psychiatrist, and because things can be decided right away on the spot. The aim of domiciliary visits is to reduce and not augment the number of admissions and if both the Psychiatrist and Mental Welfare Officers see the patient in his habitual environment it is easier to decide whether follow up at home is advisable and practicable.

Mental Health Prevention Service.

The total number of patients referred to the Service in this Division from all sources during the year was 217, the sources of these referrals being -

From general practitioners	72
From hospitals (following treatment)	37
From local education authorities	10
From police and courts.	23
From other sources (relatives, other agencies)	34
From out patient clinics	41
	217

Of the total patients referred to above, 80 patients entered hospital under the following Sections of the Mental Health Act, 1959:-

Admitted informally (Section 5)	47
Admitted for observation (Section 25)	3
Admitted for treatment (Section 26)	3
Admitted for emergency period of observation	27
	80

In addition to the 80 patients admitted to hospital, several other patients have been admitted informally without our knowledge, as it is not the hospitals' normal practice to inform us when patients are so admitted. Sometimes we learn of them when after-care is necessary, but if no after-care is necessary, there is perhaps little point in informing us and the hospital, by so doing, might destroy some of the confidence the patient has in the confidential nature of their illness.

This makes a subsequent visit to the patient by the Mental Welfare Officer rather more difficult for the early history is not always forthcoming and from our point of view it might well be more helpful if we could know of any history of mental illness for which hospital treatment has been necessary.

Divisional Training Centre.

The Junior Training Centre ran very smoothly during 1962, and there were no untoward difficulties. On the whole, the attendance was remarkably good.

At the beginning of the year, there were thirty-four on the register. Six were admitted and five discharged, so that at the end of the year there were thirty-five on the register. Thirty of the children belonged to this Division, and five children, two boys and three girls, were children from our neighbouring Division 19.

Of the discharges, one a girl of over sixteen, was found employment; two boys over sixteen were admitted to Bradford Industrial Centre; a spastic boy was admitted to permanent institutional care, and a girl over sixteen removed from the area.

Of the admissions, one, a boy of five, was from Sowerby Bridge; two more were boys of five and six respectively, and a fourth was a little mongol girl. A boy of nine, who had been truanting from his special school, was admitted, and since attending he has been happier and has presented no problems. A girl of thirteen who was found to be ineducable at a special school, was also admitted.

Social activities during the year included a day trip to Chester Zoo, which was greatly enjoyed by all. The Christmas Party took place in December and was attended by the Mayor and Mayoress of Brighouse and County Councillor Mrs. Mitchell. The children appeared to have a very happy time and the Supervisor displayed her usual flair for decoration.

Two of the children spent a holiday in Whitby at the end of June, under the County Scheme, and enjoyed the holiday very much. One of the boys who had been particularly difficult and had had a short-stay care before proceeding to Whitby, seemed to be more manageable after his return from holiday to the family circle.

The Training Centre continues to be a very happy place, due in no small measure to the efforts of the Supervisor and her staff.

A new Training Centre, with an adult department, is scheduled to be built in 1964. The adult department is badly needed for there are seven adult females at present attending the Centre and four adult males are travelling to a training centre in a neighbouring County Borough, and several of our male children are themselves approaching adult years.

Mental Deficiency.

Regular visits were made by the Mental Welfare Officers to all defectives in the area who are under our care. The figures given in the report are for the whole Division; it has not been thought desirable to split them into different districts. The number of defectives under our

care at the 31st December, 1962, was as follows :-

Males under 16 years of age	12
Females under 16 years of age	10
Males over 16 years of age	33
Females over 16 years of age	26

The following are the particulars of the fifty-nine adults under our care at the end of the year:-

Thirty-six defectives (twenty-four males and twelve females) were in regular gainful employment, five males being employed in the textile industry, fifteen as labourers, one as a farm labourer, one as a builder's labourer, and two working for their fathers. Of the females, nine were employed in the textile industry, two on shop work and one on laundry and domestic work. Four female defectives were occupied at home in household tasks and handwork, and two male defectives assisted in the home. Two female defectives are suffering from crippling defects which prevent their employment, and another five defectives (three males and two females) did not follow any occupation. Four males over sixteen attended an industrial centre, and six females over sixteen attended our training centre.

Of the twenty-two children, nineteen (ten males and nine females) attended the Training Centre. One female child who is severely subnormal is being cared for at home with regular periods of short-stay care in hospital, and two males, aged fifteen, are in regular, gainful employment.

Social and Therapeutic Clubs.

(1) Club for Mentally Retarded Patients.

Some time ago, Miss Wroe, the Mental Health Social Worker, ran a Club for girls under supervision. There were few girls in this division who were both able and willing to attend and the Club took girls from Division 19 as well as our girls. The choice of a suitably situated premises is difficult, its suitability changing over the years, according to where the members of the Club live. To cater for both divisions, the most convenient centre is undoubtedly Halifax and we are glad to know that the Halifax-Brighouse and District Society for Mentally Handicapped Children are planning a club in the County Borough for our mentally retarded patients. With patients from Halifax and this division, there should be sufficient members to form an effective unit. The number of patients likely to attend from this division alone is insufficient to make it a success. Mentally subnormal patients have not been encouraged to attend the Halifax Psychiatric Club, which caters only for the mentally ill and not for the mentally subnormal. It is, perhaps, not very practicable to have a Club catering for both kinds of people, although it has been tried successfully elsewhere. In some cases it would appear that mentally backward people, who are only different quantitatively from the normal, might well be adaptable to Club life but mentally ill people whose illness can take so many different aspects are not always helped by dilution with the mentally subnormal, and the mentally subnormal might well find discussions and activities out of their depth and frustrating.

(2) Club for the Mentally Ill.

The 4 U Club is a therapeutic social club held at Halifax and conducted by the local Consultant Psychiatrist, Dr. Ropschitz, each week, and is attended by patients from our neighbouring Division No. 19

and from the Halifax County Borough, as well as by patients from this Division. It is now nearing the end of its second year and is well established.

The following information is contributed by the Senior Mental Welfare Officer :-

"Some fifty patients resident in this Division are members of the Club. Though by no means all patients attend each week, there is a good attendance at each meeting of the Club.

"The emphasis is basically therapeutic and the membership selective. No subnormal patients attend and all members (patients) are under psychiatric care, having been inpatients at Storthes Hall or the Halifax General Hospital Unit, or having attended at the latter Hospital Clinics.

"There is always at least one West Riding Mental Welfare Officer present on Club nights and he is available to any patient residing in the County's area.

"Considerable importance is attached to serious discussion of common social problems and frequent talks by the Psychiatrist on various mental mechanisms and manifestations. Every encouragement is given to patients to express themselves on these topics and facilities are available to pursue any particular trend of thought on a personal level or in small groupings in an ante-room. Subjects are frequently illustrated by films to enlarge and stimulate discussion. A certain amount of group-therapy is practised on a limited scale and some patients speak appreciatively of this, others looking upon this aspect of the Club's activities with a certain amount of reservation. But for the fact that the attendance at each meeting is sufficiently large to permit some degree of withdrawal of an individual from a specific activity, the therapy practised at this Club could mitigate against success in some cases.

"Some part of each evening is given up to social pursuits - dancing, music, card games, etc. - and from time to time special efforts are held when the whole evening is given up to entertainment.

"The Club provides a convenient meeting place for patients and staff alike and a small number of patients are regarded as attending in lieu of clinic sessions."

SANITARY CIRCUMSTANCES IN THE AREA.

Water Supply.

It is estimated that 99% of the inhabited houses of the Urban District are now on the public water supply. The remaining houses have private supplies derived from springs and wells, the majority of which are liable to contamination.

The Elland Water Undertaking was taken over by the newly-formed Calderdale Water Board from the 1st October, 1961. Members of the Council will be aware that the water supply from the Elland reservoirs have caused us some concern, and particularly that from the Upper Greetland reservoir, where we had difficulties respecting the plumbosolvency of the water, which has, however, been satisfactory since 1954. The Engineer and Manager of the Calderdale Water Board assures me that plans are in hand to improve the quality of the water supply from the Upper Greetland and Coldacre reservoirs, and I hope I shall be able to report on the improvements carried out next year.

I am glad to assure the Council, however, that bacteriological and chemical analysis of the water from our reservoirs during 1962 have been satisfactory.

In the accompanying table, a record of the laboratory examination for pH value and plumbosolvency of the public water supply at Upper Greetland is given. Until 1954, when steps were taken, we had unsatisfactory results. It will be noted that since 1954, we have had more satisfactory results and that although in the sample taken in April the pH value had again fallen to 6.3, no plumbosolvency was taking place. We do not anticipate any more trouble from this source, as the position is being watched very carefully by the Calderdale Water Board.

Drainage and Sewerage.

Details of the work carried out during the year are given in the Chief Public Health Inspector's report.

The Council's scheme to persuade the owners of isolated unsewered groups of properties to provide septic tanks and filters, when the Council would consider the suitable ones for a grant of half the cost, has not, up to the present, proved productive of schemes, and there still remains a hard core of these properties. To help indecisive owners, the Council decided to offer a free service for the emptying of cesspools and septic tanks, provided reasonable access was available, and the possibility of further sewer provision has been under consideration recently.

Rivers and Streams.

The Yorkshire Ouse River Board is the supervising Authority. No complaints were received during the year.

Public Baths.

I am obliged to Mr. K. Halliwell for the following statement of the attendance of bathers during 1962 :-

Mixed Bathing	22,228	Males	2,513
Females	3,681	Schoolchildren's	
		classes.	12,726
Foam, Steam, etc.	477	Slipper Baths	8,427

Eliland Urban District Record of Water Samples taken from Upper Greetland Water Supply.

Place of Collection.	Date of Collection.	Results (Lead content in gns. per gall).			
		ALL night Lead	pH value.	Half hour Lead	period pH value.
New House, Upper Greetland.	25. 3. 49.	1/2	6.3	1/8th	5.5
Prospect House, Upper Greetland.	15. 2. 50.	1/5th	6.0	1/10th	6.0
Prospect House, Upper Greetland.	2. 12. 50.	1/4th	5.0	1/10th	5.4
Prospect House, Upper Greetland.	4. 9. 51.	1/30th	6.0	1/100th	6.2
Prospect House, Upper Greetland.	13. 11. 51.	1/15th	6.4	Ni1	6.2
Prospect House, Upper Greetland.	8. 4. 52.	2/5th	5.8	1/14th	6.0
Upper Turbury, Turbury Lane.	19. 12. 52.	3/10th	5.9	3/50th	5.7
Hey, Turbury Lane, Greetland.	16. 4. 53.	4/10th	6.5	1/10th	5.8
Turbury Hall, Greetland.	29. 9. 53.	1/10th	7.3	Ni1	7.2
Turbury Hall, Greetland.	3. 3. 54.	6/25th	6.8	3/25th	5.8
Turbury Hall, Greetland.	24. 9. 54.	Ni1	6.6	Ni1	6.6
Turbury Hall, Greetland.	31. 3. 55.	Ni1	7.7	Ni1	7.8
Turbury Hall, Greetland.	7. 10. 55.	Ni1	8.2	Ni1	8.0
Turbury Hall, Greetland.	14. 3. 56.	Ni1	6.6	Ni1	6.6
Turbury Hall, Greetland.	26. 9. 56.	Ni1	7.0	Ni1	7.0
Turbury Hall, Greetland.	17. 4. 57.	Ni1	8.0	Ni1	8.0
Turbury Farm, Greetland.	5. 10. 57.	Ni1	8.1	Ni1	8.1
Turbury Hall, Greetland.	3. 4. 58.	1/48th	7.3	Ni1	7.4
Turbury Hall, Greetland.	21. 10. 58.	Ni1	7.6	Ni1	7.6
Turbury Hall, Greetland.	3. 4. 59.	Ni1	7.1	Ni1	7.1
Turbury Hall, Greetland.	5. 4. 60.	Ni1	6.8	Ni1	6.7
Turbury Hall, Greetland.	4. 10. 60.	Ni1	7.4	Ni1	7.4
Turbury Hall, Greetland.	18. 4. 61.	Ni1	6.4	Ni1	6.4
Turbury Hall, Greetland.	25. 10. 61.	Ni1	6.6	Ni1	6.6
Turbury Hall, Greetland.	3. 4. 62.	Ni1	6.3	Ni1	6.3

HOUSING.

At the end of 1962, 472 post-war Council houses had been erected in the Elland Urban District. This gives an average of 28 new Council houses each year for the seventeen years. If, however, we eliminate 1946 and 1947, when the housing programme in Elland had not really got going (only five houses were built in 1947 and none at all in 1946), we obtain an average figure of 31 per year. The position year by year is as follows :-

<u>Year.</u>	<u>No. Completed.</u>
1946	-
1947	5
1948	46
1949	33
1950	30
1951	56
1952	10
1953	32
1954	52
1955	26
1956	34
1957	28
1958	12
1959	32
1960	28
1961	16
1962	32

The 32 Council houses erected this year were 22 2-bedroomed houses and 10 3-bedroomed houses at Ashfield Road, Greetland. Although this figure is still disappointing, it is twice as many as were erected last year and has only been exceeded five times and equalled twice in the post-war years. These 32 houses have a most attractive lay-out and their open frontage with its attractive lawns is an amenity in the district.

Meanwhile, the Council's proposals for the future are much more optimistic. In 1963, 28 3-bedroomed houses now under construction at Plains Lane, Elland, should be completed. In 1964, it is hoped to complete the scheme at Melrose. This scheme was discussed in last year's report. It will provide 32 bed-sittingroom flatlets for elderly people living alone, 12 1-bedroomed flatlets for elderly couples, and 4 3-bedroomed houses, making 48 in all. In addition, there will be a warden's flat, so that 49 separate units of accommodation will be provided.

It is very gratifying that the Melrose Scheme is advancing, for this Scheme will be the fruition of happy collaboration between the County Council and the local Council, the County Council contributing to the cost of the welfare part of the Scheme, including the warden. With a Scheme like this, a great deal of work has to be done, and Mr. Thomas, the Clerk of the Council, has worked indefatigably to speed it up. It is pleasing indeed to write optimistically about the envisaged housing programme in the Elland Urban District and the 28 dwellings which we expect to have provided in 1963 and the 49 dwellings for 1964 will be

only a small proportion of what should be achieved in the years ahead.

The Chairman and Members of the Housing Committee are to be congratulated on their new policy and it is nice to record that all the Members of the Council share their view that the rehousing of the people from unsatisfactory houses must be a first priority. We cannot expect our town, with its long tradition and its fine community spirit, to continue to flourish if the people are not satisfactorily housed.

Of recent years, there has been a fall in the number of applications made for new houses. It is extremely discouraging for people when there is no prospect of such an application being satisfied and it is understandable that when this continues over a long period, a fall in supply eventually results in a fall in demand.

Meanwhile, young people have been marrying, children have been born, and if the population of the town is to grow, the young people require housing accommodation or they will go elsewhere. Better teenage incomes have led young people to expect better accommodation. Most young people now take on married life with both husband and wife working, and marriage is much more democratic. The husband is now no longer the sole wage earner and no longer, perhaps, regarded as having finished his work when he returns home. There is much more sharing of chores and much more equal partnership in marriage.

Cheerfully, young people take on commitments which would have horrified their elders. Rightly so, for unless there is still further wasteful dissipation of the national resources in armament provision, we are promised a continuous rise in our standard of living.

Although slum clearance is essential, it is understandable that when houses are built, some of them should be available for people who have been waiting for houses for years and all may not be available for slum clearance. The Council have taken the view, in my opinion rightly, that they must concentrate on slum clearance, for we have been falling behind in our programme, but we must not forget that when new housing accommodation is provided for the rehousing of persons in substandard accommodation, the housing provision made does not result in any further housing accommodation being immediately available for the public but merely in the substitution of a new house for an old one.

In some respects, in this area, slum clearance is a misnomer. In our district, we only have three people per acre, and there is a high standard of cleanliness. We have no real slums but we have many substandard houses which are unacceptable today. It is to me a considerable source of surprise, and indeed, of inspiration, that so many of the tenants of substandard houses contrive to make these old houses attractive and comfortable. Much money goes into their maintenance by the tenants, and if we counted also the labour involved, the cost would indeed be considerable. These people are worthy of good houses and I am glad indeed that the Council intend to provide them.

Without our own public transport, and when bus services are based on the County Borough providing them, the moving of people to the periphery of the town must often result in more difficulty going from periphery of Elland to the centre of the town than going into the County Boroughs. This difficulty is gradually being reduced as more and more people get their own transport, but if the centre of the town is to live, it is desirable that housing provision should be made in the centre. This particularly applies to old people and handicapped persons, who are less ambulant, and to people with young families who cannot easily change buses nor readily afford a car, and the Council have given a great deal of thought to this central area redevelopment. If the envisaged Schemes continue at their present rate, the Westgate site, where so much unsatisfactory property has been removed, should provide 24 - 1-bedroomed houses, 67 - 2-bedroomed houses, and 18 - 3-bedroomed houses, making a total

of 109 dwellings, in 1965. Westgate, which has appeared derelict for so long, is a beautiful site, and it is stimulating indeed to see the thoughtful and artistic planning envisaged by the Council. A further development at Northfield, comprising 16 housing units, is expected to be completed by 1965, so that we should have 125 new dwellings that year.

Meanwhile, we are hoping that very soon new areas in Southgate will be swept away and provide a site for another 83 dwellings. Everything is being done to complete this project as soon as possible and, altogether, we have reason to hope that in the not far distant future we shall have a new and more beautiful town, with good housing provision in its centre. We are watching these new developments with interest and enthusiasm.

To sum up, we can confidently expect to have 28 new houses at Plains Lane in 1963, 49 new units of accommodation at Melrose in 1964, and 125 new dwellings at Northfield and Westgate in 1965. These should be supplemented by considerable development at Southgate.

This year, a compulsory purchase order was made in respect of areas in Church Street and Casson Place, and a clearance order made in respect of Church Lane, Lower Edge. Public Inquiries were held in respect of both these orders and they were both confirmed, with some modifications to the compulsory purchase order. Fifty-two houses were represented in areas covered by these two Orders, fifty at Church Street and Casson Place, and two at Church Lane, and three houses were dealt with as individual houses. Closing Orders were made in respect of two of these, and a demolition order was made in respect of the other.

A table of the present position is given below :-

1. No. of dwellinghouses in the district 7135
2. No. of houses without through ventilation
included in the above 1336
3. Action taken during the year :-

A. HOUSES DEMOLISHED	No. of houses.	Displaced during year	
		Persons	Families.
In Clearance Areas. Houses unfit for habitation.	7	49	13
B. UNFIT HOUSES CLOSED.			
Under Sections 16 (4), 17 (1) and 35 (1), Housing Act, 1957	3	5	1
Parts of buildings closed under Section 18, Housing Act, 1957	1	5	1
C. UNFIT HOUSES MADE FIT IN WHICH DEFECTS WERE REMEDIED			
After informal action - by owner			66
After formal notice - Public Health Acts			
(a) by owner			6
(b) by local authority			20
4. No. of families rehoused during the year into Council-owned dwellings -			
(a) Clearance Areas			15
(b) Overcrowding			8

5. NEW DWELLINGS			
No. of new dwellings completed during the year -			
By the local authority		32	
By private enterprise		50	

6. GRANTS FOR CONVERSION OR IMPROVEMENT OF HOUSING ACCOMMODATION			
	Formal applications received during the year.	Applications approved during the year.	Number of dwellings completed during the year.
	Number of dwellings	Number of dwellings	
(a) Conversions	-	-	-
(b) Improvements	82	82	82

Overcrowding.

Recently, we have had as immigrants a number of large families who have been used to a lower standard of living than that which we possess. These families live quite happily in overcrowded conditions in older houses which lack modern amenities. Ten new cases of overcrowding came to our notice during the year. Naturally, the Council are reluctant to rehouse these people who arrive newly in the district, for although their need is greater, people who have been waiting for a new house for several years cannot readily accept others being rehoused after a few weeks or months. These families usually buy old unsuitable houses on mortgage or rental purchase, and although they are statutorily overcrowded, there is little we can do, for action sometimes causes hardship to the whole family who can ill afford a Council house in which, indeed, they might well be overcrowded. The incursion of these families might be thought to produce an argument for the provision of more four-bedroomed houses but we find that such families, even when a fourth bedroom is available, do not use it and the greater rent is unwelcome. One bedroom for the parents, shared with the newest baby or the two youngest children, and one bedroom each for the male and female children, however many of these there are, is often the standard of these larger families. The older children usually marry early and often these families cannot be persuaded to use a fourth bedroom for their standards are not those of this century. There are signs already that these families wish to adopt the standards of their adopted town and I have no doubt that the children will ultimately do so.

Atmospheric Pollution.

In the 1960 Report, our programme of smoke control areas was given in full. It will be remembered that it was intended that in 1960/61, the three Housing Estates, Greetland, Stainland, and Victoria and Park Avenues, would be dealt with, and in 1962, the Stainland area, and the Upper Greetland area in 1963. Part of Elland would be dealt with in 1964. For various reasons this programme was not attained, and the request in Circular 4/62, to prepare a programme for the five-year period, 1962/66, gave us an opportunity to bring it up to date.

Inspections in respect of the first stage of the Council's Smoke Control Programme originally envisaged for 1960/61, were completed this year, and the Council made smoke control orders to become operative from the 1st November, 1963. It is hoped that the programme envisaged for the years 1962 and 1963 will be carried out next year, and the 1964 programme remains as previously planned. Further programmes for 1965 and 1966 have been outlined. Full details of the programmes for the next five

years are given in the Public Health Inspector's Report. It will be seen that from a modest start of 379 houses in 1962, we hope to embark on 956 houses in 1965, and that in the five years of the programme over 2,500 houses will be tackled.

We were glad that our smoke control programme has been somewhat delayed for the winter of 1962/63 was not the best time to start this work. Delays were experienced in obtaining smokeless fuel, due principally to unprecedented demand and transport difficulties. Smokeless fuel is bulkier than coal, and the modern coalhouse and bunker do not cater for a long delay.

If we are to get the public with us, supplies of smokeless fuel must be plentiful, and although it is accepted that the supply of such fuel was there, its delivery was not always made at the expected time this winter. Any enlightened public health department does not lightly undertake prosecution. Indeed, the whole of our work is built on understanding and persuasion; and this particularly severe winter was not a good time to put pressure on people and especially older people who have had coal fires all their life. After our first small smoke control area is established, there should not be the same difficulty especially since the Elland Council have given a lead in their own Council houses. The position is made easier for us because the seven years which industrial firms were given in which to make the necessary alterations to plant will have elapsed, and no longer will it be a defence when dark smoke is emitted in excess of that allowed by the Dark Smoke (Permitted Periods) Regulations, 1958, that it had not been practicable to alter the premises or plant so that compliance could be attained.

Consequently, domestic fuel users will generally not have the experience of seeing smoke billowing out from industrial premises when they themselves are burning only smokeless fuel.

During the year, industrial premises have not been neglected. One hundred and fifty-four officially recorded observations were carried out and in 51 cases notices were served in respect of contraventions. Industrial users generally have been co-operative and we are grateful to them but there are still a few who prefer to live and to make others live in the dark ages.

We have been helped in our approach by the support of the Council. The Clerk of the Council has given us very substantial backing by interviewing himself the representatives of the offending firms. The day is approaching when the public of Elland will appreciate that clean air is desirable as well as clean food and clean water.

There has fortunately this year been some improvement at both the Power Station and the brickworks, but they are still a source of concern from time to time and the Alkali Inspector is well aware of that concern. He continues to work in close co-operation with us. Fuller details of the work carried out are given in the Public Health Inspector's report. This report summarises a great deal of work, and a great deal of frustration. We are determined to make Elland a cleaner town and we have the full support of the Council. In step with our new housing programme, and the development of the town centre, must come the development of clean air if we are to fully enjoy our newly provided amenities.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

General.

1962 was a remarkably good year for infectious diseases. This was not a Measles year, and although Measles was the most prevalent infectious disease, only 48 cases were notified, 45 of these occurring in November and December, the start of the usual biennial epidemic.

There were no cases of Diphtheria, Whooping Cough, Poliomyelitis, Smallpox, Ophthalmia Neonatorum, Cerebro-Spinal Fever or Food Poisoning notified during the year.

Diphtheria Immunisation.

There has been no case of Diphtheria notified in Elland since 1948. I consider that it is fair to assume that the fall in incidence of this disease, which is general throughout the country, is partly due to Diphtheria immunisation.

As with previous years, I give the figures of children immunised in two groups, the first being children who have received either an initial or a booster dose in the last five years, and the second those who were immunised at a date preceding this. The first group shows children who can be regarded as at maximum protection. It is our aim to carry out booster doses before admission to the primary school at the age of five.

Number of children at 31st December, 1962, who had completed a course of immunisation at any time before that date (i.e. at any time since 1st January, 1948):-

Age at 31.12.62. i.e. Born in Year	Under 1. 1962.	1 - 4 1961-58.	5 - 9 1957-53.	10 - 14 1952-48	Under 15 Total.
A. 1958 - 1962.	94	924	556	95	1,669
B. 1948 - 1957.	-	-	355	979	1,334

During 1962, 250 children were immunised against Diphtheria, Whooping Cough and Tetanus by Triple Vaccine. In addition, three children were immunised separately for Diphtheria and 54 children were given booster doses against Diphtheria. Of the children immunised against Diphtheria, 227 were under one year of age.

The prophylactic used was three doses of 1 c.c. Triple Vaccine (Diphtheria and Tetanus Toxoid and Pertussis Vaccine) for children under five years. Parents of these children were also given the choice of having their children immunised separately for Diphtheria and Whooping Cough or having a combined Diphtheria/Tetanus or Whooping Cough/Tetanus injection.

Tetanus Immunisation.

In addition to the 250 children who received Triple Vaccine, four were immunised against Tetanus only.

Vaccination against Smallpox.

One thousand and four hundred vaccinations and one thousand three hundred and eighty one re-vaccinations were carried out during the year. This compares with last year's figure of eighty-five vaccinations and twenty-nine re-vaccinations.

There is no doubt about the reason for the large increase in the number of vaccinations against Smallpox, for the outstanding event of the

year, from an epidemiological point of view, was the occurrence of Smallpox in the County Borough of Bradford which commenced at the end of December, 1961. Information about these cases only came to light on the 11th January, 1962, and the period of anxiety was largely over by the end of the first week in February.

Most of these vaccinations were carried out in Elland during the first fortnight (in January). We did not have an open session in Elland for public vaccination and the public were discouraged from having vaccination under mass conditions so that almost all these vaccinations were carried out by their own Doctors. Anxiety was so great at the beginning that it was difficult for the Doctors to refuse vaccination.

Unfortunately, the first news of the Bradford outbreak came on a Friday, the 12th January, so that a week had to pass before the weekly (Elland) editions of the local newspapers appeared with authoritative statements. It was difficult for people to understand that deaths occurring in established cases did not mean that fresh cases were occurring. Tragic though these deaths were, the deaths of patients who were properly isolated and with whom no possible contact could have been made by the residents of Elland, were, of course, of no epidemiological significance to the town but such deaths naturally carried a strong emotional reaction and the demand for vaccination in the first week was considerable.

We were fortunate in Elland that the early Bradford cases occurred in hospitals, for the Bradford Hospitals are not used by Elland residents to any large extent. Meanwhile, Bradford Health Department lost no time in tracing the contacts by checking all the visitors to the Hospitals during the danger period and unless some major contact had been missed, it appeared that Elland was reasonably safe. The only contacts we had in Elland were not of residents but of people who worked in Elland and lived in Bradford, Brighouse or Queensbury. These people were excluded from work during the quarantine period and kept under very close surveillance. It was not thought necessary to vaccinate their colleagues and workmates for none of these people developed the disease and were not ill at the time they were removed from any contact with Elland residents, nor, indeed, as it happened, were they ever ill. Prompt notification to us by Bradford and early vaccination must have helped in this happy result.

After the first two days, we were able to assure the public of Elland that there was no major contact in the Elland Urban District and that the risk was minimal. We did this by bulletins which were posted in the windows of shops on the main street but perhaps it was best done by the Doctors of the town who were, during this period, a great bulwark against panic and helped a great deal to reassure the public. I must also pay tribute to the local newspaper, which helped a great deal in allaying public alarm and avoided sensationalism. It gave a good lesson in responsible journalism to both national newspapers and the B.B.C. Television service.

We were very anxious that cases of vaccinia, or illness due to vaccination, should not arise and cause the possible removal of a patient to a smallpox hospital as a case of suspected Smallpox. Not only is this very disturbing for the patient but the presence of a suspected case of Smallpox in the Elland Urban District would undoubtedly have re-awakened public alarm. Mass vaccination is not without risk. The public attend in a state of acute anxiety and are sometimes far from well when they present themselves for vaccination. It was felt that the risk of mass vaccination in Elland might well be greater than the danger of disease. We knew that every effort had been made and was being made in the Borough of Brighouse, which served as a useful shield to Elland, and were reasonably confident that there was little, if any, danger in Elland. Despite the efforts of the Doctors and the Public

Health staff, and, indeed, of the Councillors, to allay public alarm, it will be seen that nearly three thousand people succeeded in protecting themselves against a possible danger.

We had several difficult cases of vaccina, a complication of vaccination, which caused us some anxiety but never at any time was there a case in Elland, despite rumours to the contrary.

It is our practice to offer primary vaccination to infants at the age of eighteen months. Eighteen months has been chosen because it is generally agreed that this is the safest age for vaccination to be carried out. During the outbreak, vaccination was offered to all infants, as it was felt that it would be unfair for mothers to be told that they had to wait until the child was eighteen months old before it could be vaccinated. We have now returned to this optimum age. One result of the outbreak is that most of the children in Elland have now had a primary vaccination and if at some time they should be in contact with a case of Smallpox, re-vaccination could be carried out within the incubation period. The chances of this happening are, of course, extremely small for Smallpox is not endemic in this country and prompt and energetic epidemiological methods will usually be sufficient to control the disease. The public are sufficiently aware now to know that vaccination of the contacts is essential, and it would seem very unlikely for a contact who has possibly missed the net, not to present himself.

During the difficult period, it was necessary sometimes to vaccinate people who were going from Elland into neighbouring towns, or travelling to other parts of the country, as the firms they were visiting or the people they were contacting were unwilling to do business unless they had had a recent vaccination. As our policy was to refuse to vaccinate any but immediate contacts to avoid the risk of confusion with the disease, these people made it much more difficult for us but we felt it was unfair to refuse to vaccinate them when their livelihood might be at stake. This, I think, is a sign of the great anxiety that prevailed in the country, due, I am sure, to muddled thinking which confused deaths from the disease among known isolated cases with the spread of the disease by the occurrence of new cases in persons who had not already been isolated as contacts.

B.C.G. Vaccination.

B.C.G. vaccination was offered to 830 thirteen year old children. Parents of only 462, or 56% consented to this valuable measure, as compared with the County average for 1961 of 67%. Of these, 459 were tested. Eighty of them, or 17% were found to be positive reactors and presumably had been exposed to the disease at some time, and 371 with negative reactions were given B.C.G. vaccination.

Mantoux testing and vaccination of contacts were also carried out.

Ten child contacts received skin tests. None of these were positive. Thirty-nine children received B.C.G. vaccination, including twenty-nine babies not previously given a skin test.

The figures under this section are all Divisional ones as it is not thought desirable to pinpoint localities.

Vaccination against Poliomyelitis.

During the year, 360 children in the Division received two injections making a total number of children vaccinated with two injections of 11,948 since the commencement of the scheme.

In addition, 250 adults were vaccinated against Poliomyelitis.

Third injections for Poliomyelitis vaccination continued at the end

of a seven-month interval, and 14,671 persons had received three injections by the end of the year.

In addition, 130 children in the most vulnerable age group 5 - 12 years were given booster doses by injection.

At the beginning of March, we received our first batch of oral vaccine. Curiously enough, there was a public resistance to this at the beginning. It obviously possesses great advantages for little children particularly often object to a prick, painless though it may be. We have also been somewhat concerned that children should not begin to believe that a visit to the Doctor necessarily involves a prick in the arm, a belief that has been somewhat fostered of recent years due to immunisation procedure. Children who had already been protected by two or three doses by injection were able to have their immunisation completed by oral vaccine and gradually the parents of most of the new cases were persuaded that oral vaccine was the method of choice.

The oral vaccine confers a broader immunity than the Salk vaccine and is now available for all.

Altogether, 544 children and 232 adults had completed immunisation by oral vaccine at the end of the year, and 2,369 persons had received oral vaccine as a reinforcing measure after two or three doses of Salk vaccine.

Oral vaccine is now well-established and it is rare indeed that we are now asked for protection by an injection of Salk vaccine.

The figures given under this section are all Divisional ones.

NOTIFIABLE DISEASES.

Erysipelas.

There was one case of Erysipelas during the year.

Pneumonia.

Only seven cases of Pneumonia were notified in 1962, but there were seventeen deaths from this disease.

Scarlet Fever.

There were two cases of Scarlet Fever notified in Elland in 1962.

Dysentery.

There was one case of Dysentery notified during the year.

Measles.

Forty-eight cases of Measles were notified during the year, as compared with 312 cases last year. There were no deaths from the disease.

Puerperal Pyrexia.

There was one case of Puerperal Pyrexia notified during the year. This was thought to be due to an Influenzal attack and not due to a uterine infection. The temperature settled down after two days. The

other members of the family also had Influenzal attacks.

Tuberculosis.

The statistics relating to Tuberculosis are presented in tabular form in Table 12.

No action has been found necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, nor under the Public Health Act, 1936, Section 172.

There were five notifications of Respiratory Tuberculosis received during 1962, as compared with eleven during 1961. In addition, three cases of Respiratory Tuberculosis transferred into the district. As opposed to these eight additions to the Register, five respiratory cases which had recovered were removed from the Register, three other cases removed from the district, and there was one death this year, a male, aged sixty-two. The number on the Register was thus reduced by one to ninety-six.

The system of special contact cards has been continued in the Division and an effort has again been made for all contacts of new cases to be investigated, including the follow-up X-ray examination at the Royal Halifax Infirmary. Other contacts are followed up regularly, and as many as possible are X-rayed whenever the Mass Radiography Unit visits the Division. The number of known contacts at present under observation in the Elland Urban District is 248 in respect of 96 respiratory cases on the register.

Of the five new respiratory cases, two were males, aged seventeen and forty-six, and three were females, aged thirty-two, fifty-two and eighty-four. The old lady has subsequently died.

The Divisional Care Committee has now completed nine years. During this period, the incidence of Tuberculosis has fallen and the treatment has been more effective. Earlier cases have come to our knowledge and less help has been necessary. The Committee have enlarged their activities to cover people suffering from Chest and Heart Diseases.

Once again, a party of patients and their families were taken to the seaside for a day trip, this time to Southport. Lunch and tea were provided and everybody seemed to enjoy this. The Committee consider this day trip to be of the utmost importance as none of the families who are taken can afford a holiday and this day out has a great effect on morale and gives the tired mothers a real change.

Christmas food parcels were again delivered to the patients' homes.

Certain patients suffering from active Tuberculosis received milk free daily under the Extra Nourishment Scheme of the County Council. Most of them received one pint but in some cases two pints were considered necessary.

Cancer.

There were forty-five deaths during 1962, twenty males and twenty-five females, from some form of malignant disease.

Table 10. Monthly Notification of Infectious Diseases during 1962.

Month.	Scarlet Fever.	Tuberculosis:- Lungs.	Other.	Pneumonia.	Erysipelas.	Puerperal Pyrexia.	Meningitis.	Dysentery.	Measles.	Whooping Cough.	Anterior Poliomyelitis.	Food Poisoning.	Totals.
January	1	1	1	1	1	1	1	1	1	1	1	1	1
February	1	1	1	1	1	1	1	1	1	1	1	1	1
March	1	1	1	1	1	1	1	1	1	1	1	1	1
April	1	1	1	1	1	1	1	1	1	1	1	1	3
May	1	1	1	1	1	1	1	1	1	1	1	1	1
June	1	1	1	1	1	1	1	1	1	1	1	1	2
July	1	1	1	1	1	1	1	1	1	1	1	1	1
August	1	1	1	1	1	1	1	1	1	1	1	1	1
September	1	1	1	1	1	1	1	1	1	1	1	1	1
October	1	1	1	1	1	1	1	1	1	1	1	1	1
November	1	1	1	1	1	1	1	1	13	1	1	1	16
December	1	1	1	3	1	1	1	1	32	1	1	1	38
Totals	2	5	1	7	1	1	1	1	48	1	1	1	65

Table 11. Notifiable Diseases (Other than Tuberculosis) and Hospital Admissions during the year 1962.

Disease	Cases Notified.	Admitted to Hospital.	Total Deaths.
Measles	48	1	1
Whooping Cough	1	1	1
Smallpox	1	1	1
Scarlet Fever	2	1	1
Diphtheria	1	1	1
Pneumonia	7	1	17
Anterior Poliomyelitis	1	1	1
Dysentery	1	1	1
Encephalitis	1	1	1
Puerperal Pyrexia	1	1	1
Meningitis	1	1	1
Erysipelas	1	1	1
Food Poisoning	1	1	1
Totals	60	1	17

Table 12. Tuberculosis - New Cases and Mortality during 1962.

Age Period	- New Cases -				- Deaths -			
	Respiratory		Non-Respiratory.		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0	-	-	-	-	-	-	-	-
1	-	-	-	-	-	-	-	-
5	-	-	-	-	-	-	-	-
10	-	-	-	-	-	-	-	-
15	1	-	-	-	-	-	-	-
20	-	-	-	-	-	-	-	-
25	-	1	-	-	-	-	-	-
35	-	-	-	-	-	-	-	-
45	1	1	-	-	-	-	-	-
55	-	-	-	-	1	-	-	-
65 and upwards	-	1	-	-	-	-	-	-
Totals	2	3	-	-	1	-	-	-

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR AND CLEANSING
SUPERINTENDENT FOR THE YEAR 1962.

To the Chairman and Members of the Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you my Annual Report for the year nineteen hundred and sixty two.

During the year two pupil trainees completed their training in the Department and passed the final examinations as Public Health Inspectors. One had been with us for seven years and the other for five years. They had been valuable additions to the staff and in the last few years had been particularly useful. Both have now obtained positions with adjoining local authorities. At the time of writing another pupil trainee has been appointed, but it will be some five or six years before he will be able to qualify.

The modernisation of Lowfields as a Cleansing Depot was partially completed during the year, but owing to the unfortunate decline in the waste paper and salvage market it was thought best to hold back with the provision of a mechanical picking and sorting belt until such times as the market improves. In the meantime it has been necessary to stock a fairly large amount of baled waste.

The bonus scheme for refuse collectors continues to be successful, and it is only in periods of extremely bad weather that the weekly collection of dustbins is not maintained.

Trade refuse collections had to be re-organised and a charge instituted for the collection of trade refuse, over a certain amount, from shops and business premises. This scheme commenced on 1st April, 1962.

Several small Clearance Areas were represented in addition to the Compulsory Purchase Order on stage one of the Southgate re-development scheme. These were the subject of Public Inquiries.

Improvement Grant work, which is done in collaboration with the Engineer and Surveyor, still increases. The number of houses dealt with is above the average for local authorities of a similar size and population. A still greater expansion is expected during 1963 if the recent Circular of the Ministry of Housing and Local Government is fully implemented.

Rather more work than usual has been caused by joint defective drainage problems and in many cases it has been necessary to serve legal notices and execute the work in default. Little advantage has been taken however, of the Council's offer to pay half the cost of providing septic tanks and filters in isolated unsewered districts in order to facilitate the provision of modern sanitation and amenities.

Food premises have continued to occupy a large part of your Inspectors' time and many improvements have been effected. Several instances of foreign bodies finding their way into food-stuffs have come to light, and in one instance a successful prosecution was instigated.

Probably most time has been spent this year on smoke abatement problems. All firms are systematically visited and several new plants have been installed and improvements effected to existing plants.

Preliminary inspections were made in respect of three Smoke Control Areas, consisting mainly of Council houses. These were approved by the Committee and prepared for the Ministry's confirmation. It is fortunate

that the Council fixed the operative date as 1st November, 1963, in view of the severe winter and consequent difficulty in obtaining smokeless fuels.

It will be seen that major improvements were carried out at five of the private slaughterhouses in order to comply with the new construction regulations, and that two private slaughterhouses were closed. Details are shown in the body of the report.

A new block of public conveniences incorporating a section of washing facilities for the market stall holders were erected on the Town Hall square. Damage at public conveniences due to the usual vandalism has this year been aggravated by the exceptional freezing conditions of the winter months.

In conclusion, may I again thank the staff who have worked to hard and enthusiastically during the year, Miss Crowther who has compiled and assembled the Annual Report, and Dr. Appleton, my fellow Officials, Chairman and Vice-Chairman and members of the Committee for their support and assistance.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,

A. D. Jackson,

Chief Public Health Inspector and Cleansing Superintendent.

FOOD HYGIENE AND SUPERVISION OF FOOD PREMISES.

During the year visits have been made to the majority of food premises in the area.

No. of Food Premises.

Ice Cream Retailers	...	...	...	74
Cafes ¹ and Snack Bars	...	...	...	12
Food Preparation/butchers	...	...	...	25
Fish and Chip Shops	...	...	...	17
Bakehouses and Shops	...	...	...	12
Bakehouses	...	...	...	2
Butchers	...	...	...	5
Other Food Shops	...	...	...	80
School Canteens	...	...	...	8
Total No. of Food Shops:-				217

A total of 116 visits were made to food premises during the year, and 3 informal notices for serious contraventions of the regulations were served upon the occupiers of premises concerned. The attention of food handlers to their responsibilities is still far from satisfactory but the position has improved during the year. The following is a list of improvements effected, following visits and action by the Public Health Inspector.

Constant supply of hot water provided	5
New sink etc provided	7
Water supply provided	2
Nailbrush, towel etc provided for handwashing	8
"WASH YOUR HANDS" notices provided	25
First aid box provided	4
Refrigerators cleansed or replaced	2
New equipment provided	11
New food display cabinets provided	8
New floors or impervious floor covering provided	14
New impervious wall coverings	11
Ceilings made impervious etc	12
Shops cleansed and redecorated throughout	7
Preparation rooms cleansed and redecorated throughout	7
Storerooms cleansed and redecorated throughout	4
Drainage systems repaired	1
Ventilation improvements	5
Lighting improvements	10
Flyproofing provided	3
Watercloset compartments cleansed and redecorated	3

Registration and re-registration under Section 16 of the Food & Drugs Act, 1955, are still being brought up to date as improvements are effected and during the year 9 such registrations were made.

Ice Cream and lollies are bacteriologically sampled from retailers there being no manufacturers within the Council's area, and of 16 samples taken all were satisfactory. There are 10 food hawkers operating from vehicles and premises within the district all of whom are registered by the Council and supervised by the Public Health Inspectors.

There were 22 complaints regarding the sale of unsound food all of which were investigated, there has been a marked increase in the number of complaints re foreign matter in foods and in most cases the human element has defeated the object of the most hygienic up to date food plants used. In one case the Food & Drugs Authority prosecuted and the firm were convicted and fined £10.

The amount of food condemned (other than raw meats) is as follows:-

	qrs.	lbs.	oz.	pints.
Tinned vegetables.	-	8	9	-
Tinned fruit.	1	21	4	-
Fish, pastes etc.	-	1	12	-
Tinned Ham.	-	7	-	-
Tinned Ox Tongues.	-	4	8	-
Jars of Chicken.	-	-	6	-
Jam.	-	4	-	-
Condensed Milk.	-	-	-	4

WATER SUPPLY.

The following table shows the number and type of samples taken:-

	Chemical.		Plumbo-Solvency.		Bacteriological.	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
Public Supply	21	1	4	-	21	1
Private Supply	-	-	-	-	5	5
Total:-	21	1	4	-	26	6

Water supplies are dealt with more fully in the Medical Officer's section of this report.

SHOPS ACTS.

Ninety-two visits were made to shops in the district in order to enforce the health provisions of the Shops Acts. These are mainly concerned with sanitary accommodation and cleanliness, but also include visits made in connection with food hygiene.

INFECTIOUS DISEASE AND DISINFECTION.

During the year, 51 visits were made to cases of infectious disease. Any bedding etc., for disinfection and disinfestation by steam are taken to the disinfector at Mill Hill Hospital, Huddersfield. Library books are stoved and returned to the Council's library.

Twenty-two inspections were made for disinfection work. This is a decrease on last year's figures.

Treatments were made for the following :-

Cockroaches	...	...	...	...	...	7
Woodworm	...	...	...	...	...	3
Red mites	...	...	...	...	...	2
Bedbugs	...	...	...	...	...	2
Beetles	...	...	...	...	...	2
Flies	...	...	...	...	...	4
Plaster beetles	...	...	...	...	...	1

Zaldecides, Aerosols and certain proprietary disinfectants were successfully used.

ATMOSPHERIC POLLUTION.

Again a major portion of your Public Health Inspectors' time has been devoted to matters dealing with atmospheric pollution. Information has been recorded in respect of 62 boiler plants, the following being a classification of the types of boiler and methods of firing at 31st December, 1962.

Type of boilers etc.

Lancashire	...	...	...	...	...	41
Vertical	...	...	...	...	...	21
Horizontal modern	...	...	...	...	...	6
Cornish	...	...	...	...	...	1
Economic	...	...	...	...	...	2
Steam generators	...	...	...	...	...	2
Continuous Kilns	...	...	...	...	...	4
Sectional/Domestic	...	...	...	...	...	12

Method of Firing.

Sprinklers	...	...	...	...	...	24
Underfeed	...	...	...	...	...	21
Chain grate	...	...	...	...	...	3
Coking	...	...	...	...	...	5
Oil fired	...	...	...	...	...	25
Hand fired	...	...	...	...	...	11

A total of 154 officially recorded observations were carried out under "The Dark Smoke (Permitted Periods) Regulations, 1958" and in 51 cases, Section 30, Clean Air Act, 1956, notices were served in respect of contraventions of the regulations. In addition numerous cautions by

telephone and personal visits to firms concerned were made by the Public Health Inspectors.

The National Coal Board and the National Industrial Fuel Efficiency Service were notified of infringements of the Act consequent upon the use of wrong types of fuel, and their representatives visited many firms in the Council's area.

During the year two more firms closed down. In both cases the boiler plant was old and obsolete and had been the cause of trouble.

As a result of constant pressure by your Inspectors four new underfeed stokers, two chain grate stokers and one oil-fired have been fitted to existing plant. Six entirely new oil-fired plants have been provided and in one case a new metal stack erected.

At one of our more troublesome plants an entirely new plant and metal chimney were fitted, the boiler being the revolutionary G.W.B. packaged boiler with built in grit arrestors. This has exceptionally high efficiency and after early teething troubles the plant settled down to good results.

Following changes made by the Central Electricity Generating Board at the Elland Power Station regarding fuel policy late in 1961, fewer complaints were received of the emission of fly-ash during 1962.

The Chief Public Health Inspector was instructed to express to the Alkali Inspector (the responsible authority) the Health Committee's continued concern at the apparent lack of progress made in respect of the control of emissions from the works of Samuel Wilkinson & Sons Ltd., Elland. Some improvement was apparent during the later half of the year.

Following a report that several firms, notwithstanding verbal and written exhortations, continued to contravene the provisions of the Act in respect of the emission of black smoke, the Clerk and the Chief Public Health Inspector met representatives of the firms concerned to hear what plans they had for remedying the position, and to stress that the time was rapidly approaching when old boiler plant would have to be replaced.

Early in the year Circular 3/62 of the Ministry of Housing and Local Government, relating to the simplification of the administration procedure in respect of privately owned dwellinghouses in smoke control areas was submitted to Committee. At the same time Circular 4/62 relative to the expedition of smoke control programmes and asking local authorities to prepare programmes for establishing smoke control areas in the five year period 1962/66 was received, and the Committee authorised the Chief Public Health Inspector to submit a report and proposals. As a consequence the following five-year programme was submitted to the Minister of Housing and Local Government and was duly approved.

<u>Year.</u>	<u>Area.</u>	<u>No. of Premises.</u>
1962.	The Council's housing estates at Greetland, Stainland and Victoria Avenue, and Park Avenue.	379.
1963.	Upper Greetland and the properties in Greetland lying to the west of the Council's Greetland housing estate, and west of an irregular line running from the junction of Rochdale Road and Moor Bottom Lane in a southerly direction to Saddleworth Road (at its junction with Ellistones Lane), and west of	

<u>Year.</u>	<u>Area.</u>	<u>No. of Premises.</u>
	Ellistones Lane. (175).	
	That part of Stainland bounded by Stainland Road (from Longfield), Bowling Green, Beestonley Lane, Black Brook and a line running from Greetland Dyeworks to Longfield. (232).	407.
1964.	That part of Elland bounded by Southgate, Victoria Road, the rear of the properties on the westerly side of Hammerstones Road and of Hullen Edge Lane to Ravenstone Wood, an irregular line running thence north - easterly to the northern extremity of Bryan Road and westerly (along the rear of the premises on the easterly side of Bryan Road and the northerly side of Hullen Edge Road) to Hullen Edge Road, Hullen Edge Road and Westgate.	430.
1965.	That part of Elland bounded by Southgate, Church Street, Eastgate, Wistons Lane, the River Calder (to the boundary with Brighouse M.B.), the boundary with Brighouse M.B. (to Dewsbury Road) and Dewsbury Road.	956.
1966.	That part of Elland bounded by Dewsbury Road (to the boundary with Brighouse M.B. at Pinfold Lane), the boundary with Brighouse M.B. and Huddersfield C.B. (to Huddersfield Road) and Huddersfield Road.	335.
		<hr/> 2,527. <hr/>

In October, details of the proposed first stage of the Council's smoke control programme, outlining the number and types of houses involved, the number and types of fireplaces requiring replacement or adaptation, the preferences shown by householders for different types of fires and the estimated tonnage of coal used annually in each of the proposed smoke control areas, were submitted to Committee, and eventually the Council made Smoke Control Orders in respect of Elland (No.1), Greetland (No.1), and Stainland (No.1) Smoke Control Areas to become operative from the 1st November, 1963.

Main details of the above areas are:-

The Elland (No.1) Smoke Control Area

No. of Council-owned dwellings	91
No. of Privately-owned dwellings	15
Estimated total cost of adaptations	£4170
Present annual tonnage of bituminous coal	415

The Greetland (No.1) Smoke Control Area

No. of Council-owned dwellings	142
No. of Privately-owned dwellings	2
Estimated total cost of adaptations	£1416
Present annual tonnage of bituminous coal	580

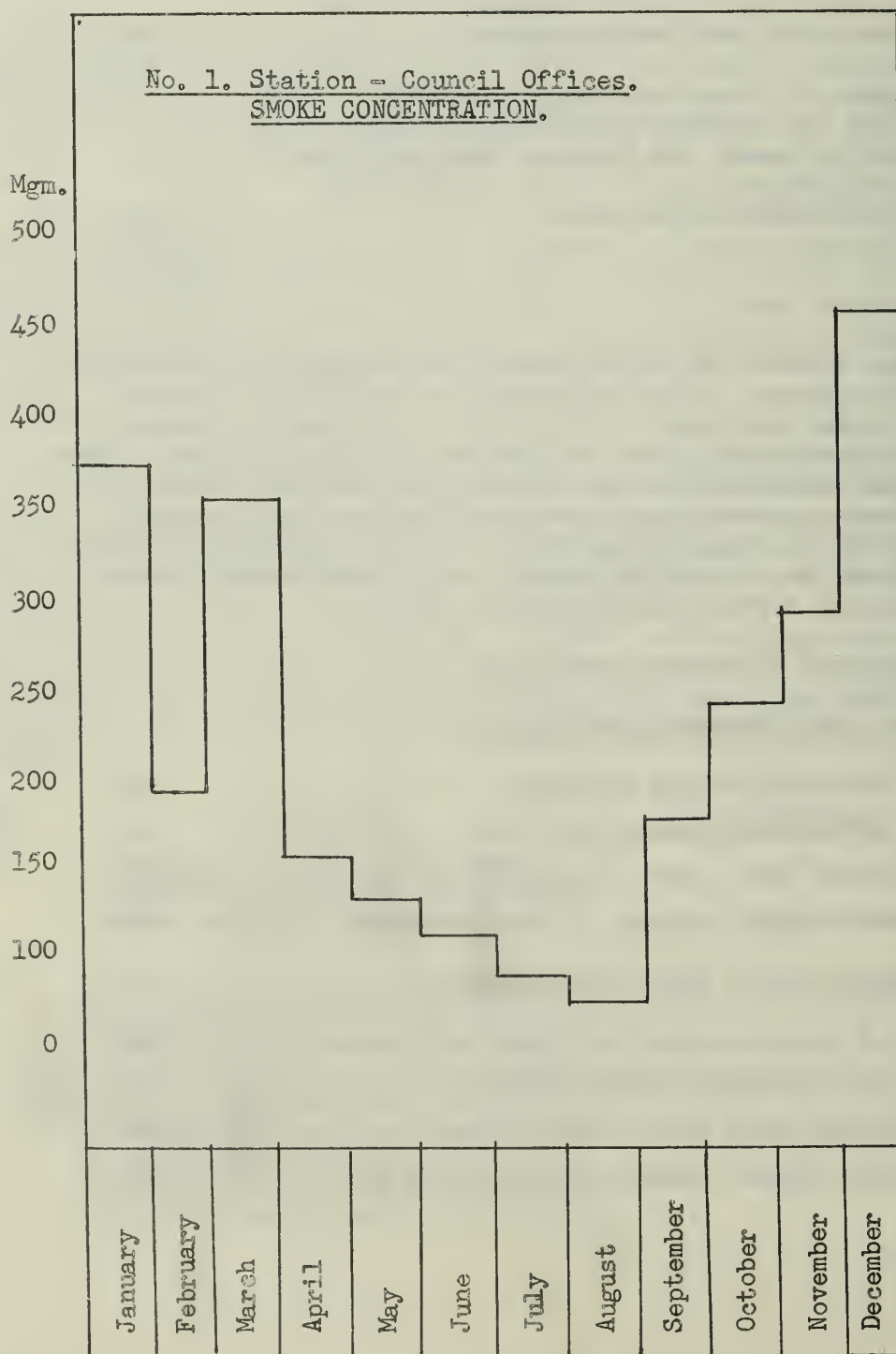
The Stainland (No.1) Smoke Control Area

No. of Council-owned dwellings	173
No. of Privately-owned dwellings	-
Estimated total cost of adaptations	£2310
Present annual tonnage of bituminous coal	590

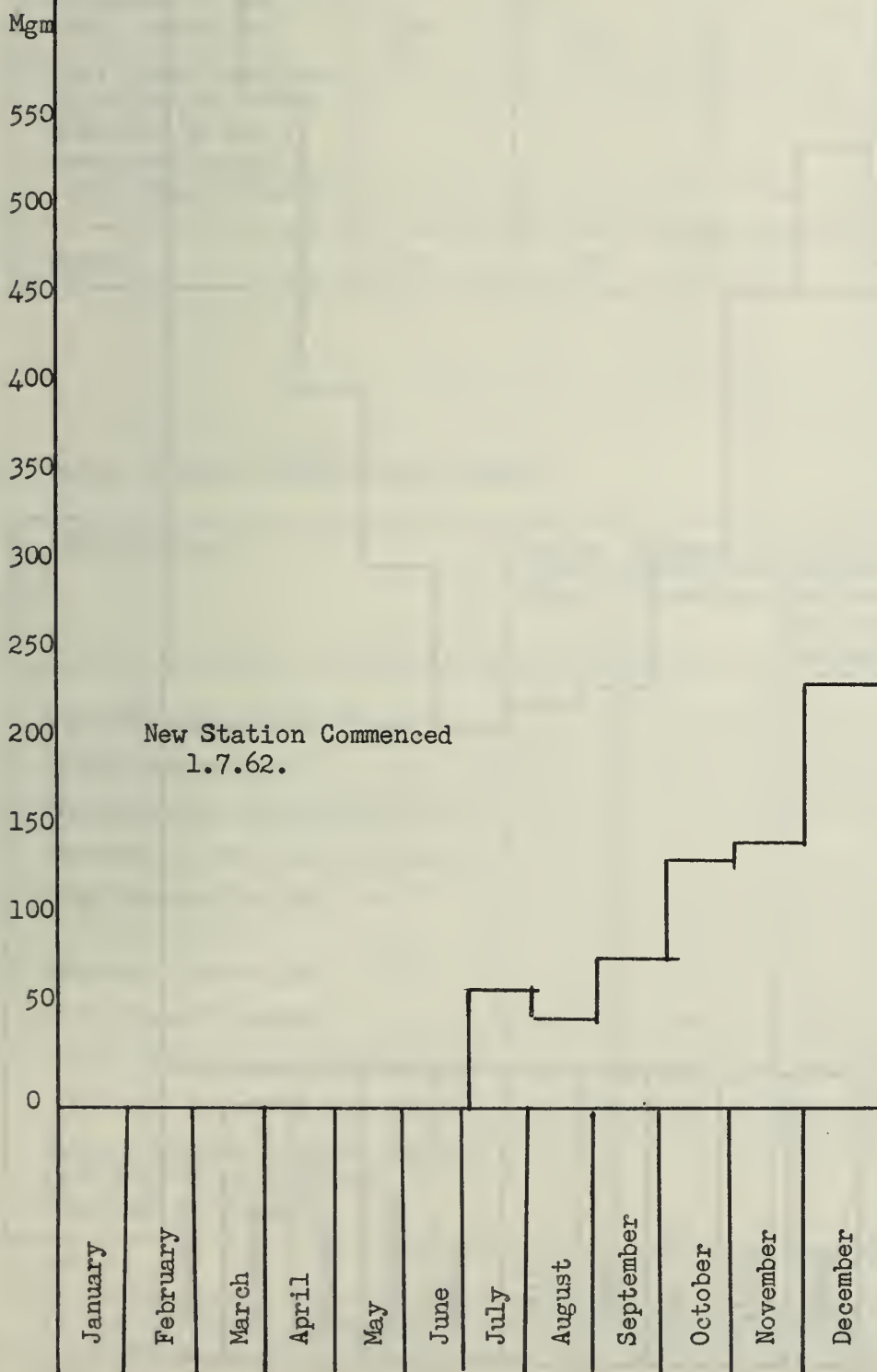
A revised scheme for the investigation of atmospheric pollution was suggested by the West Riding County Council. District Councils were asked to continue to record the measurement of atmospheric pollution and for this purpose were to be given the opportunity of purchasing at a nominal figure, the existing recording instruments in their areas. The West Riding Clean Air Advisory Council urged local authorities to continue to record the measurement of atmospheric pollution as these records were of immense value. The Health Committee decided to participate in the revised schemes.

The request that the Council co-operate with the West Riding Clean Air Advisory Council regarding a clean air campaign in the West Riding was agreed to.

The following graphs show figures for smoke concentration and sulphur dioxide readings.



No. 2 Station - Holywell Green.
SMOKE CONCENTRATION.





FACTORIES ACTS, 1937 to 1961.

1. INSPECTIONS for purposes of provisions as to health made by Public Health Inspectors.

Premises.	Number on Register.	Inspections.	Number of Written notices.	Occupiers prosecuted.
(1)	(2)	(3)	(4)	(5)
i) Factories in which Secs. 1,2,3,4, & 6, are enforced by the Local Authority.	1	1	-	-
ii) Factories not included in (i) in which Sec. 7 is enforced by the Local Authority.	198	19	-	-
iii) Other premises in which Sec. 7 is enforced by the Local Authority. (excluding outwork).	-	-	-	-
Total	199	20	-	-

2. Cases in which DEFECTS were found.

Particulars.	Number of cases in which defects were			
	Found.	Remedied.	Referred to H.M. Inspector.	By H.M. Inspector.
Want of cleanliness (S.1)	-	-	-	-
Overcrowding (S.2)	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-
Sanitary Conveniences (S.7)				
(a) Insufficient	2	-	-	2
(b) Unsuitable or defective	7	8	-	2
(c) Not separate for sexes	-	-	-	-
Other offences against the Act (not including offences relating to Outwork).	-	-	-	-
Total	9	8	-	4

It was not found necessary to institute legal proceeding under any of the above Sections of the Factories Act, or under the Sections relating to Outworkers

FACTORIES.

Below is an analysis of the 199 factories on the Council's factory register at 31st December, 1962. Such a list cannot be absolutely definitive, however, as many factories carry on more than one process.

No. of Factories on Register.

Wool industry	37
Worstedes	15
Cotton industry	12
Yarns	3
Synthetic fabrics, etc.	4
Dyers and finishers	8
Rag sorting & grinding	5
Motor vehicle repairs	18
Engineering - light	16
Engineering - heavy	7
Metal works (foundries etc).	8
Brickworks	4
Mines & quarries	4
Food & catering trade	14
Joinery	9
Provender	7
Nationalised industries	2
Slaughterhouses	7
Miscellaneous	20

SANITARY ACCOMMODATION.

Number of houses provided with waterclosets	6742
Number of waste waterclosets (estimated)	104
Number of pail closets	187
Number of privies	31
Waterclosets provided to premises during 1962	202
Waterclosets demolished in slum clearance etc.	4

It will be seen that the number of waste waterclosets, pail closets and privies steadily decrease year by year. During the year 7 pail closets and 2 privies were converted to waterclosets, making a total of 257 pail closets and 52 privies converted since the scheme was put into operation in 1950. Half the cost of conversion is paid for by the Council. Two pail closets were converted in connection with Improvement Grants.

£611 was paid in conversion grants during 1962.

As a result of action taken under the Housing Acts, 4 waterclosets were demolished in Clearance Areas.

Twentyeight waste waterclosets were converted to waterclosets as compared with 21 in 1961. Eighteen of these were converted in connection with Improvement Grants, and at the end of the year the estimated number of waste waterclosets remaining was 104. Most of the waste waterclosets converted were in the Elland area, with a few in Holywell Green, the privies were in Elland, and the pail closets converted were in the Stainland area.

In all 37 conversions were carried out in 1962, compared with 45 in 1961, and 37 in 1960. There are now only 187 pail closets, 31 privies, and 104 tippler closets left, most of which cannot be readily converted.

Tenants in the older parts of the town have still in many instances to share at sanitary accommodation, and also to walk a considerable distance to it.

The publicity given to Improvement Grants is causing more householders to take advantage of the opportunity to improve their property by providing indoor sanitation.

The percentage of houses having proper waterclosets is now 95.2% and during the year 202 waterclosets were provided at new houses and at other premises as follows:-

By means of new bathrooms and at factories etc. ...	20
Improvement Grants.	81
New Council Houses.	32
New Private Buildings.	50
Conversions of other type closets (not including Improvement Grants).	19
Conversions after Legal Notice.	-

DRAINAGE AND SEWERAGE.

Greater use has been made during the year of Section 24 of the Public Health Act, 1936, as amended by Section 15 of the Public Health Act, 1961. Notices were served in connection with defective drainage and in most cases the work was done in default by the Council and the costs recovered. Details are as follows:-

- Section 24, Public Health Act, 1936 - On 9 owners in respect of 9 houses - all work carried out in default.
- Section 39, Public Health Act, 1936 - On 2 owners in respect of 2 houses - both complied with by owner.
- Section 17, Public Health Act, 1961 - On 15 owners in respect of 25 houses and 3 owners in respect of 9 houses - complied with notice - rest carried out in default.
- Section 18, Public Health Act, 1961 - On 12 owners in respect of 12 houses - work carried out in default.

Attempts were made in several instances to persuade the owners of isolated unsewered groups of properties to formulate schemes for the

provision of septic tanks and filters in order that the houses could be brought up to a reasonable standard with regard to sanitary amenities. Very few owners, however, have taken advantage of the Council's offer to contribute towards the cost of providing septic tanks and filters. In the absence of co-operation by the owners, it is difficult to get this type of work done as it is not possible to serve legal notices where a sewer and proper water supply does not exist.

A considerable amount of drainage work has been carried out in connection with Improvement Grants, conversions, etc., and also the reconstruction and repair of defective drains. This type of work appears to be on the increase.

In addition to conversions and Improvement Grant work, there have been the usual number of complaints of faulty or stopped drains, and in connection with these 106 inspections were made. Twenty-one blocked drains affecting 85 properties were released by the Department, and 9 drains affecting 24 properties were released for the owners following advice given by the Department. Use was made of colour, volatiles and smoke in the testing of these drains. Again much time has been devoted to problems of drainage.

OFFENSIVE TRADES.

Apart from the fish friers, the only offensive trades on the register are:-

Tripe Boilers	...	...	...	1
Oil Extractor	...	...	...	1
Gut Scrapers	...	...	...	3

In two of the above cases, the gut scraping is carried out at licensed private slaughterhouses, and is only done part-time in a small way.

No complaints have been received regarding these businesses, and ten inspections were made of the premises. The general conditions and cleanliness are satisfactory.

RECORD OF INSPECTIONS.

Complaints Investigated	...	...	...	...	...	...	346
Nuisance Inspections	...	...	...	...	...	...	177
Factory Inspections	...	...	...	...	...	...	20
Shops Inspections	...	...	...	...	...	...	92
<u>Houses Inspected.</u>							
Overcrowding (visits)	...	...	...	...	...	...	18
Housing Acts	...	...	...	...	...	...	456
Revisits under Housing Acts	...	...	...	...	...	...	405
Public Health Acts	...	...	...	...	...	...	1026
Revisits under Public Health Acts	...	...	...	...	...	...	954

Verminous Premises	...	...	...	...	...	21
Houses disinfected for vermin	...	...	...	...	...	22
Infectious disease (visits)	...	...	...	...	...	51
Houses disinfected after infectious disease	...	...	...	...	...	0
House refuse removal inspections	...	....	...	...	...	107
Food complaints investigated	...	...	...	...	...	22
Food premises inspections	...	...	...	...	...	91
Water samples taken for bacteriological analysis	...	...	...	...	...	29
Water samples taken for chemical analysis	...	...	...	...	...	20
Water samples taken for plumbo-solvency	...	...	...	...	...	4
Ice Cream samples taken for bacteriological examination .	...	...	...	...	...	16
Rodent Control visits	...	...	...	...	...	578
Visits to slaughterhouses	...	...	...	...	...	779
Smoke Observations	...	...	...	...	...	217
Visits under Petroleum Acts and Regulations	...	...	...	...	...	37
Visits to Ice Cream premises	...	...	...	....	...	25
Visits to Hairdressers	...	...	...	...	...	23
Visits under Diseases of Animals Act	...	...	...	...	...	2
Smoke Control Domestic	...	...	...	...	...	408

HOUSING.

A record of the work carried out on housing by your Public Health Inspectors is shown in the Medical Officer's section of the Report. It will be seen that several areas were inspected and represented and that Public Inquiries were held before the Orders were confirmed by the Ministry.

Circular 42/62 of the Ministry of Housing and Local Government was considered by the Committee. This outlines the Minister's proposals to make more widely known the possibilities of house improvement and the grants available in respect thereof, and suggesting more positive means than those before employed of tackling the problem from a local authority point of view, and asking local authorities to inform him of the action they proposed to take.

The Surveyor and the Chief Public Health Inspector were authorised to investigate the local aspect of the questions raised. This was done and an area bounded by South Lane, Savile Road, Elizabeth Street and Rosebery Street was earmarked as a token or typical area. Owners of "sub-standard" houses within this area are to be approached and encouraged to improve their properties with the aid of grants. Similar action also to be taken in respect of other suitable areas from time to time.

SUMMARY OF SANITARY IMPROVEMENTS EFFECTED
PUBLIC HEALTH ACTS, 1875-1961.
HOUSING ACTS, 1936-1961.
RENT ACT, 1957.

During the year, the total number of inspections and visits made in all branches of the Department was 5976. 74 informal notices and 38 statutory notices were served. The following is a summary of the improvements effected:-

Interior of Houses.

Stairs repaired	...	...	...	...	...	...	1
Windows repaired or renewed	...	...	...	...	...	...	12
Ceiling replastered	...	...	...	...	...	...	3
Walls replastered	...	...	...	...	...	...	5
New sinks provided	...	...	...	...	...	...	1
Smokey chimnies abated	...	...	...	...	...	...	1
Sink wastepipe repaired or renewed	...	...	...	...	...	...	3
Sash cords renewed	...	...	...	...	...	...	1
Chimney flues repaired	...	...	...	...	...	...	1
Dampness of walls abated	...	...	...	...	...	...	3
Water gaining access to cellar abated	...	...	...	...	...	...	4
Sewage gaining access to cellar abated	...	...	...	...	...	...	7
Fireback renewed or repaired	...	...	...	...	...	...	2
Floors repaired	...	...	...	...	...	...	1
Ovens repaired	...	...	...	...	...	...	1
Other repairs	...	...	...	...	...	...	7
Proper Food store provided	...	...	...	...	...	...	3

Exterior of Houses.

Defective door frames and doors repaired or renewed	...	...	...	...	...	...	4
Eavesgutters renewed or repaired	...	...	...	...	...	...	14
Decayed pointing	...	...	...	...	...	...	6
Leaky roofs repaired	...	...	...	...	...	...	9
Rainwater pipes renewed or repaired	...	...	...	...	...	...	4
Mastic pointing to windows renewed	...	...	...	...	...	...	8
Chimney stacks repaired	...	...	...	...	...	...	2
Footpath grate repaired	...	...	...	...	...	...	1

Drainage.

Drains re-laid	...	...	...	...	...	...	5
Drains repaired	...	...	...	...	...	...	17
Drains cleansed from obstruction	...	...	...	...	...	...	15
New inspection chamber provided	...	...	...	...	...	...	4
New gullies provided	...	...	...	...	...	...	6

Sanitary Conveniences.

New waterclosets provided	...	...	...	...	...	202
Flushing cisterns repaired	...	...	...	...	...	4
Walls repaired	...	...	...	...	...	2
Privy middens converted to waterclosets	...	...	...	...	...	2
Waste waterclosets converted to wasterclosets	...	...	...	...	...	28
Pail closets converted to waterclosets	...	...	...	...	...	7
Roofs repaired	...	...	...	...	...	9
W.C. doors repaired	...	...	...	...	...	3

House refuse Accommodation.

New dustbins provided, or old dustbins renewed	513
------------------------------------------------	-----	-----	-----

OVERCROWDING.

The number of known cases of overcrowding is now seven houses, comprising fortythree persons and seven families. Ten new cases were reported during the year, ten cases were relieved by re-housing in Council houses or elsewhere.

SUMMARY OF STANDARD GRANTS, YEAR 1962.

	Bath	Lavatory Basin	Hot Water	Watercloset	Food store
26, Beech Street, Elland.	1	1	1	1	1
101, Catherine Street, Elland.	1	1	1	1	1
118, Catherine Street, Elland.	1	1	1	1	1
24, Elizabeth Street, Elland.	-	-	-	1	-
4, Limes Avenue, Elland.	1	1	1	1	1
12, George Street, Elland.	1	1	1	1	1
13, Myrtle Road, Elland.	1	1	1	1	1
19, Woodside View, West Vale.	1	1	1	1	1
61, Quebec Street, Elland.	-	-	-	1	1
99, Catherine Street, Elland.	1	-	-	1	1
33, Saddleworth Road, West Vale.	1	1	1	1	1
34, George Street, Elland.	1	1	1	1	1
59, Beech Street, Elland.	1	1	1	1	1

	Bath	Lavatory Basin	Hot Water	Watercloset	Food store
126, Catherine Street, Elland.	1	1	1	1	1
31, Catherine Street, Elland.	1	1	1	1	1
156, Rochdale Road, Greetland.	1	1	1	1	1
52, Park Road, Elland.	1	1	1	1	1
17, Dean Street, West Vale.	1	1	1	-	1
13, Langdale Street, Elland.	1	1	-	1	1
37, Langdale Street, Elland.	1	1	1	1	1
40, Elizabeth Street, Elland.	-	1	1	1	1
Laithe Croft Farm, Stainland.	1	1	1	1	1
103, Oak Street, Elland.	1	1	1	1	1
38, Beech Street, Elland.	1	1	1	1	1
22, Chapel Street, Holywell Green.	1	1	1	1	1
23, Turnpike Street, Elland.	1	1	1	1	1
15, Well Street, Holywell Green.	1	1	1	1	1
2, Elizabeth Street, Elland.	1	1	1	1	1
23, Beech Street, Elland.	1	1	1	1	1
1, Park View, Sowood Hill, Sowood.	-	1	1	-	1
21, Elizabeth Street, Elland.	1	1	1	1	1
14, Ainley Street, Elland.	1	1	1	1	1
62, Hoults Lane, Greetland.	1	1	1	1	1
11, Langdale Street, Elland.	1	1	1	1	1
19, Scarboro Terrace, Elland.	1	1	1	1	1
20, Duke Street, Elland.	1	1	1	1	-
13, Duke Street, Elland.	-	-	-	1	1
10, Union Street, West Vale.	1	1	-	1	1
7, North Street, Holywell Green.	1	1	1	1	1

	Bath	Lavatory Basin	Hot Water	Watercloset	Food store.
4, North Street, Holywell Green.	1	1	1	1	1
54, Park Road, Elland.	1	1	1	1	1
1, Union Street, West Vale.	1	1	-	1	1
Rock View, Holywell Green.	1	1	1	1	1
6, Oak Terrace, Stainland.	1	1	1	1	1
5, & 6, Station Road, Holywell Green.	1	1	1	-	1
35, Myrtle Road, Elland.	1	1	1	1	1
24, Catherine Street, Elland.	1	1	1	1	1
25, Myrtle Road, Elland.	1	1	-	1	1
2, Plains Lane, Elland.	1	1	1	-	1
35, Elizabeth Street, Elland.	1	1	1	1	1
152, Rochdale Road, Greetland.	1	1	1	1	1
22, Savile Road, Elland.	1	1	1	1	1
1, William Street, West Vale.	1	1	1	-	-
Scholes Farm, Upper Greetland.	1	1	1	-	1
30, Dewsbury Road, Upper Edge.	1	1	1	1	-
10, Chapel Street, Holywell Green.	1	1	1	1	1
6, Chapel Street, Holywell Green.	1	1	1	1	1
14, Catherine Street, Elland.	1	1	1	1	1
94, Rochdale Road, Greetland.	1	1	1	1	1
4, Chapel Street, Holywell Green.	1	1	1	1	1
21, Richmond Terrace, Elland.	1	1	1	1	1
13, Rosebery Street, Elland.	1	1	1	1	-
101, Elizabeth Street, Elland.	1	1	-	1	1
9, Denton Row, Holywell Green.	1	1	1	1	1

	Bath	Lavatory Basin	Hot Water	Watercloset	Food store
8, James Street, Holywell Green.	1	1	1	1	1
6, Thorn Street, Stainland.	-	1	1	1	1
17, Scarboro Terrace, Elland.	1	1	1	1	1
41, Albert Street, Elland.	1	1	-	1	1
28, Beech Street, Elland.	1	1	1	1	1
15, Elizabeth Street, Elland.	1	1	1	1	1
1, Sandbed, Sowood.	1	1	1	1	1
11, Thorn Street, Stainland.	1	1	1	1	1
11, Haigh Street, West Vale.	1	1	-	1	1
36, Beech Street, Elland.	1	1	-	1	1
3, Bean Street, Upper Edge.	1	1	1	1	1
9, James Street, Holywell Green.	1	1	1	1	1
121, Station Road, Holywell Green.	1	1	1	1	1
117, Park Road, Elland.	1	1	1	1	1
26, Charles Street, Elland.	-	-	-	1	1
Jagger Green Hall, Holywell Green.	1	1	1	1	1
Scar Top, Upper Greetland.	1	1	1	1	1
117, Green Lane, West Vale.	1	1	1	1	1
3, Jagger Green Lane, Holywell Green.	1	1	1	1	1
46, Beech Street, Elland.	1	1	1	1	-
15, Plains Lane, Elland.	1	1	1	1	1
9A, Middle Dean Street, West Vale.	1	1	1	1	1

	Bath	Lavatory Basin	Hot Water	Watercloset	Food store
14, Temperance Street, Elland.	1	1	1	1	1

Eightytwo houses were brought up to a satisfactory standard by means of Standard Grants at a cost of £9672, as compared with £7745 in 1961. Four advances were given for the purpose of aquiring houses at a cost of £1600.

PUBLIC CLEANSING.

The public cleansing of the district, apart from street cleansing and gully emptying, is the responsibility of the Health Department. This work includes the collection and disposal of house refuse, the emptying of dustbins, pail closets and privies, the collection and disposal of trade refuse, mainly from shops and markets.

The collection of house refuse is now on a weekly basis and is a good and satisfactory service due to the operation of a bonus scheme for the refuse collectors and to the use of modern refuse collection vehicles.

The following table gives the number of loads collected:-

Vehicle.	House Refuse removal		Goux Tubs removal		Waste Paper removal	
	Days.	Loads.	Days.	Loads.	Days.	Loads.
UWY 868 Bedford 5 ton.	251	590½	-	-	-	-
LCP 930 Karrier 5 ton.	244	576	-	-	-	-
MCP 891 Karrier 3 ton.	136	491½	105½	349	2½	12
GWV 247 Bedford 30 cwt.	-	-	-	-	12	44
EYG 824 Bedford 2 ton.	19½	110½	14½	56	135	480
YYG 16 Austin 15 cwt.	-	-	-	-	½	2

A five day week is in operation and no public cleansing work is done on Saturday mornings.

The Council administers a Municipal Dustbin Scheme and during the year 513 dustbins were provided to premises at a cost to the Council of £695.

Sales of waste paper salvaged during the year realised the sum of £902. This is much lower than normal and is due to the restrictions on the amount of paper that would be accepted by the waste paper merchants. Fortunately there is ample room for stocking surplus quantities at Lowfields and by the end of the year a considerable amount had accumulated. A small amount of tins and rags were recovered from the tip and sold for £58.

The cost of Public Cleansing throughout the year in the district, including collection and disposal of salvage, was £13,789. This figure includes the cost of the Council's Municipal Dustbin Scheme and alterations to Lowfields Cleansing Depot.

Work was completed on re-wiring the Depot and providing power points in accordance with the requirements of the Yorkshire Electricity Board. A new power baling press was installed to deal with waste paper, and a small electric hoist and runway provided to facilitate the stacking and loading of bales. New sanitary accommodation, washing facilities and a canteen were provided, together with facilities for drying clothes.

Owing to the unsatisfactory state of the market for salvage, the question of providing a refuse hopper and moving conveyor belt was temporarily left in abeyance.

A considerable amount of damage was caused, particularly to the roof at Lowfields Depot by the exceptional gale late in February.

Commencing 1st April the following scheme came into operation for trade refuse:-

- (1). That the Council undertake the collection and removal of Trade Refuse.
- (2). That the contents of one bin from a lock-up shop and two bins from a combined house and shop (being mainly domestic refuse) be regarded as domestic refuse and collected free in that category once a week.
- (3). That the contents of bins collected from shop premises in excess of those specified in (2) above be charged for as Trade Refuse at the rate of £1 for each bin for a six month period, the charge to be payable in advance and a twice weekly collection of the contents of the same bin to count as two collections for this purpose.
- (4). That any Trade Refuse removed from business premises and not falling within the categories defined in Paragraphs (2) and (3) above be charged for at the rate of £1 an hour.
- (5). That private tipping at the Council's tips be charged for at the rate of 2/6 a load for loads up to 2 tons and 5/- a load for loads over 2 tons.

MEAT INSPECTION.

The Council's Report to the Minister of Agriculture, Fisheries & Food, on the existing and probable future requirements of the district for slaughtering and slaughterhouse facilities was accepted and the Minister stated that he proposed to appoint 1st July, 1962, as the day from which all slaughterhouses in the district must comply with the construction regulations.

The following is a list showing the extent of the works carried out by the Occupiers of slaughterhouses in order to comply with the requirements :-

(1).

- (a) Address:- Jagger Green Hall, Jagger Green.
- (b) Description of Premises:- Private slaughterhouse.
- (c) Occupier:- Mr. Peter Smith.
- (d) Total Area of land:- Approximately 10 acres.
- (e) Approximate floor areas:-
- | | | |
|-----|------------------------------------------|-------------|
| (1) | Covered lairage | 900 sq. ft. |
| (2) | Slaughterhall | 400 sq. ft. |
| (3) | Hanging room (separate) | 240 sq. ft. |
| (4) | Chill room Nil (shop refrigerator used). | |
| (5) | Gut room | 300 sq. ft. |
| (6) | Hide room | 100 sq. ft. |
- (f) Grazing land:- Approximately 9 acres.
- (g) There is no dwelling within the curtilage of the building used as slaughterhouse premises.

Observations:-

- (1) Proper stunning pen installed.
- (2) Stainless steel sink unit comprising two sinks provided together with hot and cold water.
- (3) Separate w.c. provided.
- (4) Food racks and drinking troughs provided to lairages.
- (5) Readily accessible and suitable facilities for the washing of hands provided.
- (6) Suitable facilities provided for the sterilization of cloths, knives, etc used in the slaughterhouse.
- (7) First aid materials available in a readily accessible position.
- (8) Facilities available in a room separate from meat rooms for the changing of clothes.

(2).

- (a) Address:- Low Laithe Farm, Elland.
- (b) Description of Premises:- Private slaughterhouse.
- (c) Occupier:- Mr. Harry Wood.
- (d) Total Area of land:- Approximately 1 acre.
- (e) Approximate floor areas:-
- | | | |
|-----|------------------------------------------------|-------------|
| (1) | Covered lairage | 880 sq. ft. |
| (2) | Slaughterhall/
hanging | 530 sq. ft. |
| (3) | Hanging room (separate) | 185 sq. ft. |
| (4) | Chill room Nil (refrigerator in slaughterhall) | 95 cu. ft. |

- (5) Gut room 200 sq. ft.
- (f) Grazing land:- Small croft approximately $\frac{1}{2}$ acre.
- (g) The slaughterhall forms part of a building containing a dwelling.

Observations:-

- (1) Stunning pen provided.
- (2) Lairages adequately lit and ventilated.
- (3) Slaughterhouse floor and yard repaired and resurfaced.
- (4) Walls of slaughterhall and hanging rooms rendered to a satisfactory height.
- (5) Slaughterhall and hanging room roofs underdrawn.
- (6) Windows enlarged to give good natural lighting.
- (7) Premises flyproofed and vermin proofed.
- (8) Artificial lighting to the slaughterhall and hanging room brought up to required standard.
- (9) Hanging space made separate from slaughterhall.
- (10) All equipment made to comply with the regulations.
- (11) Welfare room provided for the changing of clothes etc for operators.
- (12) Adequate food racks and drinking troughs provided for the lairages.
- (13) Adequate constant supply of hot water made available.
- (14) Suitable facilities provided for the sterilizing of clothes knives, etc used in the slaughterhouse.

(3).

- (a) Address:- Towngate, Stainland.
- (b) Description of Premises:-. Private slaughterhouse.
- (c) Occupier:- Stainland & Holywell Green Co-Operative Society Ltd.,
- (d) Total Area of land:- Approximately $1\frac{1}{4}$ acres.
- (e) Approximate floor areas:-
- | | |
|---------------------------------------------|-------------|
| (1) Covered lairage | 330 sq. ft. |
| (2) Slaughterhall | 400 sq. ft. |
| (3) Hanging room | 174 sq. ft. |
| (4) Chill room Nil (refrigerators in shops) | |
| (5) Bacon curing room | (disused). |
- (f) Grazing land:- Approximately $\frac{3}{4}$ acre.
- (g) The slaughterhall does not form part of a building which contains a dwelling.

Observations:-

As the premises did not comply with the construction regulations by the appointed date a licence was not issued.

(4).

- (a) Address:- Banks Top slaughterhouse,
Oatlands Farm, Greetland.
- (b) Description of Premises:- Private slaughterhouse and farm.
- (c) Occupier:- Mr. Geoffrey Morton.
- (d) Total Area of land:- Approximately 12½ acres.
- (e) Approximate floor areas:-
- | | | |
|-----|-------------------------------------|---------------|
| (1) | Covered lairage | 1,185 sq. ft. |
| (2) | Slaughterhall/
hanging | 360 sq. ft. |
| (3) | Separate hanging | Nil |
| (4) | Chill room Nil (shop refrigerators) | |
| (5) | Gut room | 200 sq. ft. |
- (f) Grazing land:- Approximately 11½ acres.
- (g) The slaughterhall does not form part of a building which contains a dwelling.

Observations:-

- (1) Stunning pen provided.
- (2) Concrete floor of slaughterhall and hanging rooms repaired and resurfaced.
- (3) Windows of slaughterhall and hanging room enlarged so as to give good natural lighting.
- (4) Premises flyproofed and vermin proofed.
- (5) Adequate lighting to slaughterhall and hanging room brought up to the required standard.
- (6) Separate hanging spaces for carcasses provided.
- (7) Watercloset provided for the use of the staff.
- (8) Constant supply of hot water provided for hand washing.
- (9) Welfare room provided for the changing of clothes, etc for the operators.
- (10) Separate lairages provided distinctly from those used for milk production and feeding.
- (11) Suitable facilities provided for the efficient sterilizing of clothes, knives, etc.
- (12) First aid materials made available in a readily accessible position.

(5).

- (a) Address:- New Yard Farm, Stainland.
- (b) Description of Premises:- Private slaughterhouse and farm.
- (c) Occupier:- Mr. Samuel R. Goddard.
- (d) Total area of land:- Approximately 18 acres.
- (e) Approximate floor areas:-
- | | | |
|-----|-----------------|---------------|
| (1) | Covered lairage | 1,730 sq. ft. |
|-----|-----------------|---------------|

- | | | |
|-----|------------------------------------------------------|-------------|
| (2) | <u>Slaughterhall/
hanging</u> | 356 sq. ft. |
| (3) | <u>Hanging room
(separate)</u> | 360 sq. ft. |
| (4) | Chill room with 300 cu. ft. refrigerator 100 sq. ft. | |
- (f) Grazing land:- Approximately 17 acres.
- (g) The slaughterhall forms part of the building containing the farm dwelling.

Observations:-

- (1) Stunning pen provided.
 - (2) Walls of slaughterhall and hanging room rendered to suitable height.
 - (3) Roofs of slaughterhall and hanging rooms underdrawn.
 - (4) All windows enlarged to adequate size.
 - (5) Premises efficiently flyproofed and vermin proofed.
 - (6) Artificial lighting to slaughterhall and cooling rooms brought up to adequate standard.
 - (7) Hanging space for bovine carcasses made separate from the slaughterhall.
 - (8) All equipment made to comply with the regulations.
 - (9) A hide store and gut room provided.
 - (10) Watercloset provided for the use of the staff.
 - (11) Constant supply of hot water and sink provided for hand washing.
 - (12) Welfare room provided for the changing of clothes for the operators.
 - (13) Adequate food racks and drinking troughs provided to the lairages.
 - (14) Lairages separate from those provided on the premises for milk production and feeding.
 - (15) Suitable facilities provided for the efficient sterilizing of clothes, knives, etc.
 - (16) First aid equipment made available in a readily accessible position.
- (6).

- | | | |
|-----|--------------------------------------|-----------------------------|
| (a) | <u>Address:-</u> | Crosshills Farm, Greetland. |
| (b) | <u>Description of
Premises:-</u> | Private slaughterhouse. |
| (c) | <u>Occupier:-</u> | Mrs. Helen Dyson. |
| (d) | <u>Total Area of
land:-</u> | Approximately 11 acres. |
| (e) | <u>Approximate floor
areas:-</u> | |
- | | | |
|-----|-------------------------|----------------------------|
| (1) | Covered lairage | 1,020 sq. ft. |
| (2) | Slaughterhall | 120 sq. ft. |
| (3) | Hanging room | 158 sq. ft. |
| (4) | Chill room | Nil (Refrigerator in shop) |
| (5) | Hide store and gut room | 60 sq. ft. |

- (f) Grazing land:- Total 10 acres.
- (g) The slaughterhall adjoins farm buildings and does not form part of a building which contains a dwelling.

Observations:-

- (1) Stunning pen provided.
- (2) Repairs carried out to concrete floor of slaughterhouse and hanging room.
- (3) Walls of slaughterhall and hanging rooms rendered to a satisfactory height.
- (4) Roofs of slaughterhall and hanging room underdrawn.
- (5) Windows of slaughterhall enlarged to adequate size.
- (6) Slaughterhall flyproofed.
- (7) Artificial lighting to slaughterhall and hanging room brought up to satisfactory standard.
- (8) All equipment made to comply with the regulations.
- (9) Walls and floor of hide room repaired so as to provide a smooth, hard, impervious surface.
- (10) Welfare room provided for the changing of clothes for the operators.
- (11) Adequate food racks and drinking troughs provided to the lairages.
- (12) Lairages made separate from any lairage provided on the premises for milk production and feeding.
- (13) Suitable facilities provided for the washing of hands.
- (14) Facilities provided for the efficient sterilizing of clothes, knives, etc.
- (15) First aid materials made available in a readily accessible position.

(7).

- (a) Address:- Manor House Farm, Stainland.
- (b) Description of Premises:- Private slaughterhouse and farm.
- (c) Occupier:- Mr. Eric. R. Mitton.
- (d) Total Area of land:- Approximately 44 acres.
- (e) Approximate floor areas:-
- | | |
|-------------------------------|------------------------------------------------|
| (1) Covered lairages | 1,120 sq. ft. |
| (2) Slaughterhall/
hanging | 260 sq. ft. |
| (3) Hanging
(separate) | Nil |
| (4) Chill room | Nil (Refrigerator in slaughterhall 20 sq. ft.) |
- (f) Grazing land:- Approximately 20 acres.
- (g) The slaughterhall adjoins farm buildings but does not form part of a building which contains a dwelling.

Observations:-

As the premises did not comply with the construction regulations by the appointed date a licence was not issued.

Meat inspection occupies a major portion of your Inspectors' time, and entails many hours working outside normal office hours.

During the year 779 visits were made to slaughterhouses, and the following table shows the number of animals inspected. Much of the meat goes into adjoining districts.

Month.	Heifers.	Bullocks.	Cows.	Sheep.	Calves.	Pigs.	Total.
Jan.	123	124	37	720	150	199	1353
Feb.	72	93	26	420	157	135	903
Mar.	63	101	23	348	168	137	840
Apr-May.	158	183	44	600	245	234	1464
June.	81	77	17	343	119	96	733
July.	96	67	24	581	205	96	1069
Aug.	97	90	19	701	201	88	1196
Sept.	93	60	17	590	219	85	1064
Oct.	104	93	20	631	237	133	1218
Nov.	92	72	19	633	152	122	1090
Dec.	71	57	16	366	199	208	917
Total.	1050	1017	262	5933	2052	1533	11847

All the above were inspected at the slaughterhouses before release. More animals were slaughtered in 1962 (11847) than in 1961 (10719).

It is pleasing to again report a decrease in the amount of diseased meat:-

1962	0 tons.	5 cwts.	1 qr.	13 lbs.
1961	0 tons.	5 cwts.	3 qrs.	1 lb.
1960	0 tons.	11 cwts.	0 qrs.	10 lbs.
1959	1 ton.	11 cwts.	3 qrs.	24 lbs.
1958	1 ton.	9 cwts.	2 qrs.	21 lbs.
1957	2 tons.	10 cwts.	2 qrs.	0 lbs.

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	Horses.
No. Killed	2067	262	2052	5933	1533	-
No. Inspected ..	2067	262	2052	5933	1533	-
All diseases except Tuberculosis and Cysticerci (whole carcase condemned)	-	-	-	-	-	-
Carcases of which some part or organ was condemned ..	168	13	4	445	25	-
Percentage of the number inspected affected with disease other than tuberculo- sis and cysticerci.	8.1%	4.9%	0.19%	7.5%	1.6%	-

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	Horses.
Tuberculosis only ..						
Whole carcasses condemned.	-	-	-	-	-	-
Carcases of which some part or organ was condemned.	1	-	-	-	3	-
Percentage of the number inspected affected with tuberculosis	0.05%	-	-	-	0.19%	-
Cysticercosis	-	-	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-	-	-
Carcase submitted to treatment by refrigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

Particulars of Carcases inspected and particulars of Condemned Meat.

Number of animals slaughtered 11,847
Number of animals inspected 11,847

Condemned meat is collected and delivered to Mitchell and Broadbent's factory in Halifax, where it is processed into non-edible materials. The Council refund to the occupiers of the slaughterhouses any income derived from the sale of condemned meat.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.

The provisions of this Act are administered by the Health Committee through its Public Health Inspectors.

The Act forbids the use of certain filling materials for upholstering, stuffing of beddings, toys, baby carriages, etc., except on premises registered by the local authority. Premises where rag flock is stored or manufactured must be licensed.

Provisions are incorporated to prevent the sale or use of unclean filling materials, and regulations have been made giving standards of cleanliness.

RODENT, AND PEST CONTROL.

The following is a summary of work carried out under the Prevention of Damage by Pest Act, 1949, in accordance with the recommendations of the Ministry of Agriculture, Fisheries and Food:-

Number of Properties inspected.

Local Authority	...	...	...	...	...	...	...	4
Dwellinghouses	...	...	...	...	...	...	...	75
Other Premises	...	...	...	...	...	...	...	50
Agricultural	...	...	...	...	...	...	...	4

Total Inspections (including re-inspections).

Local Authority	...	...	...	...	...	...	...	8
Dwellinghouses	...	...	...	...	...	...	...	210
Other Premises	...	...	...	...	...	...	...	344
Agricultural	...	...	...	...	...	...	...	16

Properties Infested by Rats (Major infestations).

Other Premises	-
----------------	-----	-----	-----	-----	-----	-----	-----	---

Properties Infested by Rats (Minor infestations).

Local Authority	...	...	...	...	...	...	...	2
Dwellinghouses	...	...	...	...	...	...	...	44
Other Premises	...	...	...	...	...	...	...	23
Agricultural	...	...	...	...	...	...	...	4

Properties Infested by Mice (Major infestations).

Local Authority	...	...	...	...	...	...	...	-
Dwellinghouses	...	...	...	...	...	...	...	-
Other Premises	...	...	...	...	...	...	...	-
Agricultural	...	...	...	...	...	...	...	-

Properties Infested by Mice (Minor infestations).

Local Authority	...	...	...	...	...	...	...	-
Dwellinghouses	...	...	...	...	...	...	...	31
Other Premises	...	...	...	...	...	...	...	22
Agricultural	...	...	...	...	...	...	...	-

Properties Treated by Local Authority.

Local Authority	...	...	...	...	...	...	...	4
Dwellinghouses	...	...	...	...	...	...	...	75
Other Premises	...	...	...	...	...	...	...	50
Agricultural	...	...	...	...	...	...	...	4

Total Treatments (including re-treatments).

Local Authority	...	...	...	...	...	...	...	8
Dwellinghouses	...	...	...	...	...	...	...	210

Other Premises	... ..	344
Agricultural	... ..	16

There is no Rodent Operative as such, the work being done by the pupil trainee and Cleansing Foreman, under the supervision of the Public Health Inspectors, all of whom have now attended the courses of instruction organised by the Ministry.

The Council is required to carry out regular inspections of the district so as to prevent damage and danger to health by major infestations of rats and mice. The total number of visits made during the year was 578, and 133 treatments were carried out. The following summary shows how these were made up and the results obtained.

<u>Type of Premises.</u>	<u>No. of Treatments.</u>
Industrial	50
Farms	4
Sewage Works	1
Refuse Tips	3
Domestic	75
Number of baiting points	472
Number of poison takes	354
Estimated number of rats killed ..	996
Estimated number of mice killed ..	424

Domestic premises receive treatment free of charge, whilst business premises and factories are charged according to the time taken and the material used.

Treatments have become easier and cheaper by the use of Warfarin as a poison.

All refuse tips, sewage works etc. have received systematic attention and several farms have been visited.

All the sewers in the Council's area were treated once during the year, with good results there being no major infestation noted.

PETROL (CONSOLIDATION) ACTS, 1928 & 1936.

PETROLEUM (MIXTURES) ORDER, 1929.

PETROLEUM (CARBIDE OF CALCIUM ORDER) 1929, ETC.

The Chief Public Health Inspector carries out the duties of Petroleum Officer for the Elland Urban District. Duties under the above Acts include the annual licensing of premises where stocks of petroleum or petroleum mixtures are kept, and the inspection and testing of all new petrol pumps and installations for the storage of petrol.

Sixty licences were in force at the end of the year for the storage of Petroleum Spirit, and one licence was issued for the storage of Petroleum Mixtures.

Your Inspectors work in co-operation with the County Fire Service.

PUBLIC CONVENIENCES.

The care and up-keep of the Public Conveniences is the responsibility of the Health Committee. An employee is engaged full time on cleansing of the lavatories and collecting of the coins from the locks. Again much wilful damage has taken place during the year and although this is reported to the Police, there seems to be no effective way of curbing this vandalism which becomes a cost on the rates in repairs and replacements.

The following is a list of the conveniences at the end of 1962.

Town Hall Square Gents.
Town Hall Square Ladies.
South End Gents.
South End Ladies.
Boxhall Gents.
Boxhall Ladies.
Westgate Gents.
Westgate Ladies.
Bridge End Gents.
Bridge End Ladies.
Bowes Yard Gents.
Bowes Yard Ladies.
Crosshills Gents.
Crosshills Ladies.
Stainland Gents.
Stainland Ladies.

The new public conveniences on the Town Hall Square were completed during the year at a cost of approximately £2400. A room is incorporated at the end of the block for the use of the Market Stall holders. Sinks with hot and cold water are provided so that the food vendors may comply with the Food Hygiene Regulations.

EDUCATION.

Following an invitation from the Association of Public Health Inspectors, the Health Committee delegated one Public Health Inspector to attend the week-end School at Wentworth Woodhouse.

Two Public Health Inspectors attended courses on Smoke Control arranged by the Coal Utilisation Council and held at Leeds.

